

Exhibit D
Independent Educational Evaluation (IEE)
completed by Dr. Sarah Irby

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Client Name:	Kevin Bardwell, Jr.	Intake/Evaluation Date:	12/23/2021
Birth Date:	11/05/2002	School Observation Date:	01/14/2022
Age:	9-years, 2-months	Date of Report:	01/26/2022
Sex:	Male	Parent/Guardian:	Kevin Bardwell, Sr.

CONFIDENTIAL
PSYCHOLOGICAL EVALUATION

REASON FOR EVALUATION:

Kevin Bardwell, Jr. was referred for an independent education evaluation (IEE) at Irby Psychological Services (IPS) by his lawyer, Janet Goode, due to concerns regarding a recent school evaluation. Concerns noted by Kevin's father, Kevin Bardwell, Sr., at the time of intake included speech/language delays, social deficits, inattention, hyperactivity, repetitive motor movements, sensory-related behaviors, and learning difficulties. His father requested an evaluation to determine the presence of Autism Spectrum Disorder (ASD) or other appropriate diagnoses to provide recommendations for intervention services at school based on current levels of functioning.

PSYCHODIAGNOSTIC PROCEDURES:

Autism Diagnostic Observation Schedule, Second Edition (ADOS-2) – Module 1
Behavior Assessment System for Children, Third Edition – Parent Rating Scales-Child (BASC-3 PRS)
Behavior Assessment System for Children, Third Edition – Teacher Rating Scales-Child (BASC-3 TRS)
Behavioral Observations
Classroom Observation
Comprehensive Test of Nonverbal Intelligence, Second Edition (CTONI-2)
Conners, Third Edition – Parent Short Form (Conners-3)
Conners, Third Edition – Teacher Short Form (Conners-3)
Parent Semi-Structured Clinical Interview
Records Review
Social Responsiveness Scale, Second Edition (SRS-2) – Parent
Social Responsiveness Scale, Second Edition (SRS-2) – Teacher
Vineland Adaptive Behavior Scales, Third Edition – Domain-Level Parent/Caregiver Form
Vineland Adaptive Behavior Scales, Third Edition – Domain-Level Teacher Form

CAREGIVER INTERVIEW:

Kevin's father and stepmother (father's girlfriend) provided the following information during a clinical interview concerning Kevin's past and current functioning. Kevin is a 9-year, 2-month-old boy living with his father, father's partner (Ebony Guy), brother (age: 10), and sisters (ages: 1, 6, and 7) in Memphis, Tennessee. Kevin also has a maternal half-brother (age: 18) and two maternal half-sisters (ages: 15 and 14) who live outside of the home. Kevin was recently (summer 2020) removed from his mother's care while living in Indiana, as she was arrested on drug charges in Nebraska. At that time, Kevin's father went to Indiana, obtained Kevin's educational records, and moved Kevin to Memphis. Per parental report, family history is significant for legal challenges, suspected attention-deficit/hyperactivity disorder (ADHD), and hearing impairment. Mr. Bardwell indicated the ongoing custody battle and Kevin's lack of support as stressors the family has experienced in the past year. Additionally, he identified some family as social supports.

Mr. Bardwell stated that Kevin was born full-term following an unremarkable pregnancy. At birth, he weighed 5 pounds, 3 ounces. Kevin met his motor milestones within normal limits, but his language was notably delayed and he continues to demonstrate significant language delays. Currently, he communicates using phrase speech and engages in frequent echolalia (i.e., repeats what others say). Kevin was diagnosed with autism at age 3 in Nebraska. When Kevin was 2 years old, he had skin grafts on his feet after third degree



burns due to extremely hot bath water. Following these procedures, Kevin had to learn how to walk again and received physical therapy. No additional history of major/chronic illnesses, hospitalizations, accidents/trauma, or sexual/physical abuse were reported. Kevin is currently not taking any medication. Regarding appetite, Mr. Bardwell reported that Kevin loves fruit, but is often selective about what he eats. No concerns with sleep were reported. Kevin's vision and hearing were screened in fall 2021; results for hearing were within normal limits and he was prescribed glasses for nearsightedness. Notably, Kevin did not participate in early hearing assessments because he did not like his ears touched, and an auditory brainstem response (ABR) test was conducted in 2015 at Boys Town National Research Hospital, which revealed a unilateral hearing loss.

About educational history, Kevin was initially assessed by Nebraska Early Development Network (EDN) prior to age 2. Services provided through EDN included service coordination and special instruction. Service coordination helped provide wrap around services (e.g., WIC, housing, SSI) to Kevin's family. After turning 3, Kevin qualified under the category of developmental delay for an Individualized Education Program (IEP) through Norfolk Public Schools. He was placed in a special education preschool program. They were going to evaluate further for autism until Kevin and his family unexpectedly moved to Indiana. Once in Indiana, Kevin was evaluated for autism and placed in a special education preschool program. In summer 2020, Mr. Bardwell went to Indiana and moved Kevin and his siblings with him to Memphis. In July 2020, Mr. Bardwell attempted to enroll Kevin in Shelby County Schools, but was unable to until he obtained legal guardianship. As such, Kevin did not start his 2nd grade year September 2020. Last year, Kevin attended school virtually due to the COVID-19 pandemic. His IEP was not fully implemented until October 2021. He is currently in a functional skills classroom for most of the day and receives speech therapy twice per week. Reported: "Kevin appears to enjoy school and has minimal behavior problems there. He enjoys spending time with peers in the general education classroom and Ms. Guy noted that Kevin talks about his friends when he gets home from school each day."

Related to broader behavioral concerns, Mr. Bardwell reported inattention and mild frustration. For inattention, Kevin has difficulty sticking with one task for very long and moves between toys quickly. He is generally a happy child, but sometimes he gets frustrated when someone takes something that belongs to him or when he is corrected for doing something he is not supposed to do. At school, Kevin is reportedly "stubborn" and can resist engaging in tasks (e.g., coming to the white board to do a math problem) for more than a few minutes. He will often walk away and return to his desk instead of sustaining focus on the tasks.

Regarding behaviors often associated with ASD, in conjunction with the communication difficulties, Kevin's caregivers reported concerns with social skills, sensory-related behaviors, repetitive behaviors, and restricted interests. Concerning his social skills, Kevin is well liked by peers, but has difficulty interacting and sustaining conversations with peers. He also is slow to warm and selective about who he interacts with. About sensory-related behaviors, Kevin is sensitive to loud noises, which was worse when he was younger, as he covered his ears and screamed. Currently, Kevin smells everything, especially his food, and puts noisemaker toys to his ears. Kevin also engages in visual inspection and peers at items out of the corner of his eye. Reported repetitive behaviors include completing an activity repeatedly (e.g., rolling cars or stacking blocks). Restricted interests include music and cars.

Kevin's teacher, Erika Malone, completed general comments on several rating scales. She noted that Kevin sometimes whines, looks away from others, and wipes his eyes to gain their attention rather than use his words to express his frustration. However, she noted that he is starting to tell others why he is mad and will use one word or point to request. Socially, Ms. Malone noted that Kevin often plays alongside other children, rather than directly with them. He will repeat things and randomly calls out his classmates' names. Ms. Malone noted that Kevin requires direct, one-on-one support with all classroom assignments.

PREVIOUS EVALUATIONS:

Nebraska

A records request was sent to Nebraska EDN and records were returned within one week. The school district provided past Individualized Family Service Plans (IFSP) and his initial Multidisciplinary Evaluation Team

(MDT) Report dated August 21st, 2014. At this time, Kevin was administered the *Developmental Assessment of Young Children (DAYC)*, which evaluated his development in the five main areas. Notably, his Physical Development was in the Average range (SS = 91) and his Fine Motor and Cognitive skills were in the Low Average range (SS = 82 for both). However, his Communication and Social skills were in the Extremely Low range (SS = 50 and 54, respectively) and his Adaptive skills fell in the Low range (SS = 78). The speech therapist also administered the *Receptive-Expressive Emergent Language Test, Third Edition (REEL-3)*, which revealed receptive and expressive language skills in the Extremely Low range (SS ≤ 55, for both subtests). Based on this evaluation, Kevin qualified for an IFSP under the category of developmental delay and received services within the home until his 3rd birthday.

Indiana

Kevin was evaluated by Gary Community School Corp on April 25th, 2018. Prior to this evaluation, Kevin was receiving services under the IEP category of developmental delay. This evaluation was to determine a more appropriate eligibility category. For this assessment, Kevin's teacher completed the *Adaptive Behavior Assessment System, Third Edition (ABAS-3)*, which revealed his Practical skills were in the Low Average range (SS = 85), his Social skills were in the Low range (SS = 71), and his Conceptual skills were in the Very Low range (SS = 63). He was administered the *Receptive One Word Picture Vocabulary Test, Fourth Edition (ROWPVT-4)*, *Expressive One Word Picture Vocabulary Test, Fourth Edition (EOWPVT-4)*, and the *Developmental Assessment of Young Children, Second Edition (DAYC-2)*. On the EOWPVT-4, Kevin was easily distracted, and the results were not presented, as the examiner felt they were not an accurate measure of his skills. However, Kevin participated during the ROWPVT-4 test, which revealed receptive language skills in the Extremely Low range (SS < 55). Only the Adaptive domain of the DAYC-2 was reported, and it fell in the Low Average range (SS = 84). The occupational therapist used the *Peabody Developmental Motor Scales, Second Edition (PDMS-2)*, but specific scores were not reported. His teacher at the time also completed the *Gilliam Autism Rating Scale, Third Edition (GARS-3)*, which revealed ASD symptoms in the Level 3 range. Results of this evaluation suggested that Kevin was eligible for special education services as a child with autism and no longer qualified under the category of developmental delay.

Tennessee

Kevin was most recently evaluated by William E. Graves, school psychologist for Lucie E. Campbell Elementary School on September 1st, 2021. For this assessment, Kevin was administered the *Wechsler Nonverbal Scale of Ability (WNV)* 2-subtest Full-Scale IQ (FSIQ) and selected subtests from the *Woodcock Johnson IV, Tests of Achievement (WJ IV ACH)*. Kevin's father and teacher each completed the *Vineland Adaptive Behavior Scales, Third Edition (Vineland-3)*, *Gilliam Autism Rating Scale, Third Edition (GARS-3)*, and *Behavior Assessment System for Children, Third Edition (BASC-3)*. A classroom observation was conducted, and the *Systematic Adaptive Behavior Characteristics Checklist* was completed. Results of this assessment suggested that Kevin's current intellectual functioning was in the Extremely Low range (SS = 48) based on the FSIQ-2 (i.e., Matrices and Spatial Span subtests). Notably, Kevin demonstrated limited comprehension during this assessment, and these are likely an underrepresentation of his current skills. Similarly, on the WJ-IV ACH, Kevin demonstrated limited skills, as he did not read any words, comprehend what he was reading, and did not complete any mathematical equations. However, he did write his name and recognize and write letters and numbers. On the Vineland-3, Ms. Alston, Kevin's general education 3rd grade teacher, indicated that his overall adaptive skills were in the Extremely Low range (SS = 47), with all three domains (i.e., Social, Conceptual, and Practical) also falling in the Extremely Low range. In contrast, his father reported his overall adaptive skills in the Very Low range (SS = 66), with Extremely Low Communication skills (SS = 54) and Low Daily Living and Socialization skills (SS = 70 and 77, respectively). On the BASC-3, Ms. Alston reported Clinically Significant concerns for Hyperactivity, Aggression, Conduct Problems, Anxiety, Somatization (i.e., physical symptoms of anxiety), Learning Problems, and Atypicality (i.e., does strange things) and At-Risk concerns for Depression (i.e., social withdrawal), Attention Problems, and Withdrawal. However, his father reported all symptom areas to fall in the Average range. On the GARS-3, a measure of autism related behaviors, Ms. Alston and Mr. Bardwell rated Kevin in the Level 2 range for symptoms. The overall results of this evaluation supported Kevin's eligibility of autism and suggested the presence of an intellectual disability, pending the decision of the IEP team.

INDIVIDUALIZED EDUCATION PROGRAMS:**Nebraska**

Kevin initially qualified for an IFSP in August 2014 and received services through his 3rd birthday, until he transitioned into the Norfolk Public Schools. No formal speech therapy was provided based on the IFSP or initial IEP. However, he received special instruction biweekly and service coordination monthly. The transition steps included in the IFSP included planning for his 3rd birthday and transitioning services to the school system. Once he transitioned into the public school system, his IEP consisted of the following goals:

- Kevin will increase skills in the following areas: imitation of actions and movements, ability to wait, ability to complete tasks independently, following a daily routine, following instructions, sorting, matching, understanding concepts (e.g., size, shape, color, quantity, and prepositions), and name family members.

Kevin was placed in a special education preschool classroom within an early childhood education program for 200 minutes/twice weekly. No speech therapy services were provided at this time.

Indiana

Specifics of his IEP through Gary Community School Corporation were not accessible, though several requests to the Gary Community School Corporation were sent in December 2021 and January 2022.

Tennessee

After the evaluation dated September 1st, 2021 (summarized above), an IEP meeting was scheduled to develop an educational plan for Kevin. He was determined eligible for services in the state of Tennessee under the primary category of Autism and the secondary category of intellectual disability on October 20, 2021, 13 months after he was formally enrolled in Shelby County Schools. Current IEP goals include:

- "Given verbal prompts, Kevin will improve his performance of prevocational tasks to a score of 3 or higher, demonstrating average to above average performance, as measured by data collection and teacher observations by the end of the IEP."
 - When given a written or verbal assignment, Kevin will increase is time on task to ___ minutes, within 4 of 5 trials with 80% accuracy as measured by data collections and teacher observations each nine weeks. *Note: no time was included in the IEP.*
 - When given a written or verbal assignment, Kevin will attempt to begin an assignment without teacher reassurance within 4 of 5 trials with 80% accuracy as measured by data collections and teacher observations each nine weeks.
- When presented with text, Kevin will increase his basic reading skills in the areas of phonics, decoding, and word recognition from a KK to a 1.0 grade-level as measured by work samples, data collection, and district assessments by the end of the IEP.
 - When shown word lists and/or a short passage, Kevin will demonstrate awareness of letter/sound relationships within 4 of 5 trials with 80% accuracy as measured by data collections and teacher observations each nine weeks.
 - When shown word lists and/or a familiar text, Kevin will locate specific word patterns and sight words within 4 of 5 trials with 80% accuracy as measured by data collections and teacher observations each nine weeks.
- Using manipulatives, drawings, and various strategies, Kevin will increase his ability to identify numbers and solve math calculations to increase his level of performance from a <K.0 grade-level to a K.0 grade-level as measured by work samples, data collection, teacher observations, and formal assessments by the end of the IEP.
 - When shown a set of numbers, Kevin will identify his numbers up to 20 within 8 out of 10 trials with 80% accuracy as measured by work samples, data collection, teacher observations, and informal assessments each nine weeks.
 - When given a set of manipulatives, Kevin will add and subtract single-digit numbers within 8 out of 10 trials with 80% accuracy as measured by work samples, data collection, teacher observations, and informal assessments each nine weeks.

- Given multi-modal prompts, Kevin will label and identify common objects with increasing complexity relating to home, school, and community settings with 80% accuracy given 4 out of 5 opportunities across 3 consecutive sessions as measured by SLP data by the end of the IEP period.
 - Given pictures, Kevin will name and identify objects related to home with 60% accuracy given 4 out of 5 opportunities across 3 consecutive sessions as measured by SLP data.
 - Given pictures, Kevin will name and identify objects related to school with 60% accuracy given 4 out of 5 opportunities across 3 consecutive sessions as measured by SLP data.
 - Given pictures, Kevin will name and identify objects related to community with 60% accuracy given 4 out of 5 opportunities across 3 consecutive sessions as measured by SLP data.
- Given multi-modal prompts, Kevin will label actions expanding into 2-3 word utterance combinations with 80% accuracy given 4 out of 5 opportunities across 3 consecutive sessions as measured by SLP data by the end of the IEP period.
 - Given pictures, Kevin will name 10 actions or "-ing" cards with 80% accuracy given 4 out of 5 opportunities across 3 consecutive sessions as measured by SLP data.
 - Given pictures, Kevin will use nouns + actions or "-ing" with 80% accuracy given 4 out of 5 opportunities across 3 consecutive sessions as measured by SLP data.
 - Given pictures, Kevin will use nouns + actions + noun with 80% accuracy given 4 out of 5 opportunities across 3 consecutive sessions as measured by SLP data.
- Given multi-modal prompts, Kevin will follow spatial directions with 80% accuracy given 4 out of 5 opportunities across 3 consecutive sessions as measured by SLP data by the end of the IEP period.
 - Given verbal or visual prompts, Kevin will follow 1 step directions with 80% accuracy given 4 out of 5 opportunities across 3 consecutive sessions as measured by SLP data.
 - Given verbal or visual prompts, Kevin will follow 2 step directions with 80% accuracy given 4 out of 5 opportunities across 3 consecutive sessions as measured by SLP data.
- Given multi-modal prompts, Kevin will use total communication to effectively communicate wants and needs with 80% accuracy given 4 out of 5 opportunities across 3 consecutive sessions as measured by SLP data by the end of the IEP period.
 - Given verbal, visual, and tactile cues, Kevin will use 5 functional signs with 50% accuracy given 4 out of 5 opportunities across 3 consecutive sessions as measured by SLP data.
 - Given verbal, visual, and tactile cues, Kevin will use picture exchange to select activity of choice given 4 out of 5 opportunities across 3 consecutive sessions as measured by SLP data.

His current accommodations include:

- Providing instructions in alternative formats (written, picture, verbal, etc.)
- Giving directions in small, distinct steps
- Preferential seating (i.e., area not distracting to Kevin)
- Minimize distractions (e.g., visual, auditory, tactile, movement, and/or social)
- Allow breaks
- Oral testing for directions and/or test items for testing
- Extended time for testing (i.e., time and a half)
- Additional time (i.e., 30 minutes) for assignments
- Speech to text for completing assignments

He also receives 6.75 hours of special education time in the Functional Skills classroom per day (33 hours, 45 minutes per week) and language therapy twice weekly for 30 minutes. No other specialized services were noted in the most recent IEP. According to an assistant in his functional skills class, Kevin's daily schedule consists of:

- 9:00 am – arrival
- 9:00 am to 11:00 am – instructional time within functional skills class
- 11:00 am to 11:30 am – lunch with special education class
- 11:30 am to 12:30 pm – specials (i.e., PE, art, music, etc.) with general education class
- 12:30 pm to 1:00 pm – lunch with general education class

- 1:00 pm to 1:30 pm – recess with general education class
- 1:30 pm to 2:45 pm – instructional time within functional skills class

CLASSROOM OBSERVATION:

Kevin was observed on January 14th, 2022 from 12:30 pm to 2:15 pm. At the start of the observation, Kevin was in the cafeteria eating lunch with his peers. Initially, he was sitting alone at a table, quietly eating an apple for about 3-5 minutes. Eventually, a peer in his class came and gave Kevin a hug and sat next to him at the table. The other child started sharing his food with Kevin (e.g., chocolate covered pretzels, chocolate pudding) and several children gave Kevin their apples. Each time Kevin was handed an apple, he examined it slowly. At one point, there was a fight at a table across the cafeteria, which did not seem to bother Kevin. Throughout the meal, Kevin picked at most of the food items on his plate and seemed disinterested in eating the fish sticks. While seated at the table, Kevin tapped his foot. When told to clean up his area, Kevin followed instructions and threw his items in the trash with minimal prompting from the teachers.

After lunch (1:03 pm), the class transitioned to recess. Kevin lined up with his classmates and they walked to their classrooms to get their jackets. At 1:13 pm, the class finally made it outside to the playground. Kevin paced around the playground equipment and repeatedly went down the same slide, walking the same pattern each time. After about 5 minutes, the class was instructed to line-up. Kevin was prompted by another teacher to line-up with his class, but he stopped to tie his shoes and put on his gloves. It took the class about 3 minutes to line up, but Kevin waited patiently and followed instructions. Once the class was quiet, the teacher guided them back to their class.

At 1:28 pm, while the class was still in the hallway, Kevin was greeted by Ms. Malone, his special education teacher, who escorted him back to the functional skills classroom. In the functional skills classroom, there were 12 students (10 boys, 2 girls), Ms. Malone, and two teacher's assistants. One child engaged in vocal stimming and was loud at times, which did not seem to bother Kevin. Ms. Malone provided a lesson on vertical addition and invited students to come to the board one at a time. Kevin waited patiently at his desk for his turn and went up to the board when called. He had notable difficulty following instructions at the board, as he only repeated what Ms. Malone said. After a few moments, he rocked from foot to foot and attempted to return to his desk, but was easily redirected back to his task, briefly. Notably, Kevin used his left hand to write answers to math problems on the board but required help to solve the problem.

Note: The school district's lawyer coordinated the observation, and prior to the observation, the lawyer instructed the special education teacher to engage in instructional time even though the class had earned a movie. After 30 minutes of teaching the lesson, the teacher approached the examiner and asked if that was long enough before turning on the movie (as a reward for good behavior throughout the week).

BEHAVIORAL OBSERVATIONS:

Kevin presented for testing appropriately dressed and groomed and accompanied by his father and his father's partner (Ebony Guy). Notably, Kevin wore his glasses during today's session. Kevin's hearing and vision appeared adequate for testing, as he appropriately responded to visual and auditory stimuli. Throughout the evaluation, Kevin was easily distracted and often left his seat. Once he warmed up to the examiner, his behavior and focus improved and he was more willing to complete work. However, he still left the testing table often and was distracted by items in the testing room. Frequent prompts and reminders were needed to help him focus. In addition, breaks were allowed between subtests to help him attend to tasks. At times, Kevin answered impulsively and picked answers without looking at all options. Additional teaching on sample items was needed to ensure comprehension of task demands.

About verbal communication, Kevin used a variety of spontaneous single words (e.g., "car," "police," etc.) and phrase speech (e.g., "my turn" and "watermelon, yum-yum"). However, most language was used for labeling items or echolalia (i.e., repeating what others said). Although Kevin used gestures to communicate (e.g., blowing a kiss, waving, etc.) he poorly integrated them with verbal communication and did not appear to adequately understand others' gestures. Throughout the evaluation, Kevin made variable eye contact with others, which improved throughout the session. Furthermore, Kevin responded to his name intermittently,

as he sometimes ignored others. Kevin did direct many facial expressions toward others for a variety of emotions including excitement and confusion.

Additionally, Kevin demonstrated several behaviors associated with autism including repetitive behaviors, restricted interests, and sensory-related behaviors. Repetitive behaviors included lining up toys and he often fixated on the toy food and cars. Notably, Kevin engaged in some imaginative play, as he participated in a birthday party routine and pretended to cook and eat the play food. Sensory-related behaviors included covering his ears when ignoring others and blowing air from a foam rocket launcher into his face and ears. However, these behaviors were consistent with his caregivers' reports of his performance in a variety of settings. Thus, results from today's evaluation are likely a representative sample of Kevin's current abilities.

TEST RESULTS:

Narrative Score Descriptors proposed by Kranzler & Floyd (2013)*		
Standard Score	Scaled Scores	Narrative Descriptor
≥140	18+	Extremely High
130-139	16-17	Very High
120-129	14-15	High
110-119	12-13	High Average
90-109	8-11	Average
80-89	6-7	Low Average
70-79	4-5	Low
60-69	2-3	Very Low
≤59	1	Extremely Low

*Descriptors used in test interpretation for all cognitive, achievement, and adaptive measures. Adapted from Kranzler, J. H., & Floyd, R. G. (2013). *Assessing Intelligence in children and adolescents: A practical guide*. New York, NY: Guilford Press

Comprehensive Test of Nonverbal Intelligence (CTONI-2)

The *CTONI-2* is an individually administered clinical instrument for assessing the intellectual ability of children without relying on the need to use spoken language. The *CTONI-2* provides a composite score that represents general intellectual ability (i.e., Full-Scale IQ), as well as a Pictorial Scale and Geometric Scale. The Pictorial Scale is designed to measure "higher-order" nonverbal abilities such as generalization, discrimination, and sequencing. There is some cognitive verbal load required, although it is reduced. The Geometric Scale measures "lower-order" nonverbal abilities with no verbal load required. This test of intelligence has a mean (i.e., average score) of 100 and a standard deviation (i.e., measure of variance) of 15. The index scales are based on individual subtests that have a mean of 10 and a standard deviation of 3.

Scale/Subtest	Standard Score	Scaled Score	Percentile
Pictorial Analogies	--	9	37
Pictorial Categories	--	4	2
Pictorial Sequences	--	5	4
Pictorial Scale	73	--	3
Geometric Analogies	--	3	1
Geometric Categories	--	12	75
Geometric Sequences	--	2	<1
Geometric Scale	72	--	3
Full-Scale IQ	70	--	2

Kevin's performance on the *CTONI-2*, revealed that Kevin's overall nonverbal intelligence fell in the Low range. His scores were evenly developed between the Pictorial and Geometric scales. Further analysis revealed variable performance across subtests, which was likely due to his variable attention and impulsive responding. When Kevin focused and took his time to answer questions, he often got them correct. However, he sometimes became repetitive with responding (e.g., always selected the last option) without looking at each option carefully. Notably, these scores were higher than his performance on the *WNV* in September 2021. However, Kevin was allowed time to adjust to the examiner and feel comfortable in the testing room before beginning any testing.

Vineland Adaptive Behavior Scales, Third Edition – Domain-Level Parent/Caregiver Form

The *Vineland-3* provides a comprehensive, norm-referenced assessment of the adaptive skills of individuals who are school-aged to adulthood. Adaptive behavior is defined as the performance of day-to-day activities necessary to take care of oneself and get along with others. Adaptive behavior is age-based and defined by the expectations and standards of others. In general, adaptive behavior represents the typical performance rather than the ability of the individual (i.e., what a person does versus what they can do). The Domain-Level form is completed by a parent/caregiver who can report knowledgeably on the adaptive behavior of the examinee. The Domain-Level form of the *Vineland-3* is standardized for children and adults ages 3 years and older and contains four adaptive skill areas and an Adaptive Behavior Composite (ABC; standard score of 100 with a standard deviation of 15). Results are presented below:

Parent – Kevin Bardwell, Sr.			
Domain	Standard Score (90% Confidence Interval)	v-scale Score	Percentile
Communication	50 (42-58)	--	<1
Daily Living Skills	71 (62-80)	--	3
Socialization	67 (60-74)	--	1
Motor Skills	73 (64-82)	--	4
Adaptive Behavior Composite	63 (58-68)	--	1
Teacher – Erika Malone			
Domain	Standard Score	v-scale	Percentile
Communication	48 (38-58)	--	<1
Daily Living Skills	53 (44-62)	--	<1
Socialization	53 (44-62)	--	<1
Motor Skills	56 (44-68)	--	<1
Adaptive Behavior Composite	51 (44-58)	--	<1
Internalizing	--	19	--
Externalizing	--	19	--

Per his father's responses on the *Vineland-3*, Kevin's overall Communication skills fell in the Extremely Low range. His father reported that Kevin sometimes uses plurals, sometimes follows if-then statements, and sometimes says his name when asked. However, Kevin does not use the word "and" when speaking, does not answer "wh-" questions, and does not use advanced gestures to communicate. His Daily Living Skills fall within the Low range. Notably, Kevin sometimes counts objects one-by-one, sometimes puts clothing on correctly, and sometimes buttons large buttons. However, Kevin consistently stays with his parents in public, is careful around hot and sharp objects, and wipes up his own spills. His Socialization and Motor Skills fall within the Low range. Socially, Kevin does not say how others are related to him, does not try and make friends with others his age, and does not modulate his speech to fit the conversation. However, Kevin does have a best friend, does copy what other children are doing, and sometimes follows limits placed by parents. Kevin's overall level of adaptive skills were reported to be in the Very Low range and are consistent with his cognitive functioning as measured by the *CTONI-2*.

Ms. Malone's ratings on the *Vineland-3* suggest that Kevin's adaptive functioning across all areas is in the Extremely Low range. Regarding Communication skills, Kevin does not say his age when asked, does not respond to "wh-" questions without support, and does not use plurals. However, she reported that Kevin does write his full name from memory and can sometimes complete 1-page forms. For Daily Living Skills, Kevin finds the appropriate bathroom, asks for help when needed, and understands what a clock is used for. However, he does not stay focused when the teacher is speaking, does not understand healthy vs. unhealthy foods, and does not complete homework independently. Socially, Kevin does not help others when asked, does not share when asked, and does not play with peers without supervision. However, Kevin does control his anger, does act differently around different people, and does use words to express his emotions. Regarding Kevin's maladaptive internalizing behavior, Ms. Malone reported that he avoids interacting with

others, sometimes is overly needy, and sometimes lacks interest in completing tasks. However, he does not complain of feeling sick without a medical reason and is not irritable. For externalizing behavior, Kevin sometimes is stubborn and sometimes is more active than peers. Overall, these ratings align with previous adaptive ratings across measures and testing sessions.

Behavior Assessment System for Children, Third Edition – Parent Rating Scales-Child (BASC-3 PRS)

The *BASC-3 PRS* is a guardian-completed broadband measure designed to evaluate the behavior of children and young adults aged 2 through 25 years. The *BASC-3 PRS* is a comprehensive measure of both adaptive and problem behaviors, and the Child form is used for children aged 6 through 11. The form contains descriptors of behaviors that the respondent rates on a four-point scale of frequency, ranging from 'never' to 'almost always.' The PRS assesses the three broad domains of: Externalizing Problems (i.e., Hyperactivity, Aggression, and Conduct Problems), Internalizing Problems (i.e., Anxiety, Depression, and Somatization), and Adaptive (i.e., Adaptability, Social Skills, Leadership, Activities of Daily Living, and Functional Communication). In addition to scale and composite scores, the PRS provides a broad composite, the Behavioral Symptoms Index (i.e., Atypicality, Withdrawal, and Attention Problems). All validity scales on the *BASC-3 PRS* were within the Acceptable range, suggesting that Mr. Bardwell's responses are likely an accurate representation of Kevin's current behavioral and adaptive functioning. On the *BASC-3 PRS*, Mr. Bardwell reported Kevin to exhibit behavioral symptoms across all areas. However, Mr. Bardwell rated Kevin's Adaptive Skills to be in the Clinically Significant range (T = 30). Main concerns in this area are due to Clinically Significant levels of problem behaviors regarding Kevin's, Social Skills (T = 30) and Functional Communication (T = 25), as well as At-Risk levels of Adaptability (T = 36) and Leadership (T = 31). Such a profile of scores is consistent with an ASD diagnosis.

Behavior Assessment System for Children, Third Edition – Teacher Rating Scales-Child (BASC-3 TRS)

The *BASC-3 TRS* is a teacher-completed broadband measure designed to evaluate the behavior of children and young adults aged 2 through 25 years. The *BASC-3 TRS* is a comprehensive measure of both adaptive and problem behaviors, and the Child form is used for children aged 6 through 11. The form contains descriptors of behaviors that the respondent rates on a four-point scale of frequency, ranging from 'never' to 'almost always.' The *BASC-3 TRS* assesses the three broad domains of: Externalizing Problems (i.e., Hyperactivity, Aggression, and Conduct Problems), Internalizing Problems (i.e., Anxiety, Depression, and Somatization), School Problems (i.e., Attention Problems and Learning Problems), and Adaptive (i.e., Adaptability, Social Skills, Leadership, Activities of Daily Living, Study Skills and Functional Communication). In addition to scale and composite scores, the *BASC-3 TRS* provides a broad composite, the Behavioral Symptoms Index (i.e., Atypicality and Withdrawal). Validity scales on the *BASC-3 TRS* indicate that Ms. Malone responded to items in a consistent manner but reported an unusually high number of maladaptive behaviors (F-Index). However, based on information provided during the clinical interview and behaviors observed during testing, these ratings may be an accurate reflection of Kevin's current behavioral and socioemotional difficulties. On the *BASC-3 TRS*, Ms. Malone reported Kevin to exhibit an At-Risk level of concern with Externalizing Problems (T = 61). Specifically, Kevin demonstrates Clinically Significant levels of Hyperactivity (T = 71). Kevin's School Problems fell in the Clinically Significant range (T = 79) due to Clinically Significant Attention Problems (T = 71) and Learning Problems (T = 82). Regarding his Behavioral Symptoms, Ms. Malone reported Clinically Significant concerns (T = 74), with Clinically Significant Atypicality (T = 90; e.g., does strange things) and Withdrawal (T = 75). Similarly, Ms. Malone rated Kevin's Adaptive Skills to be in the Clinically Significant range (T = 19). Main concerns in this area are due to Clinically Significant levels of problem behaviors regarding Kevin's Study Skills (T = 22) and Functional Communication (T = 19), as well as At-Risk levels of Adaptability (T = 36), Social Skills (T = 31) and Leadership (T = 32). Such a profile of scores is consistent with an ASD diagnosis and indicates the need for further examination of Kevin's social development and current level of functioning to rule-out other neurodevelopmental disorders.

Conners, Third Edition – Parent Short Form (Conners-3)

This measure is a narrowband, parent-completed assessment of Kevin's current behavioral and social-emotional functioning related to symptoms associated with attention-deficit/hyperactivity disorder (ADHD). The *Conners-3* uses T-Scores with a mean of 50 and a standard deviation of 10. The validity indexes

for the *Conners-3* were within the Acceptable range—suggesting that parent responses are likely an accurate representation of Kevin's current behavioral and adaptive functioning. Mr. Bardwell's responses on the *Conners-3* indicate that Kevin exhibits Clinically Significant symptoms related to Learning Problems (T = 90) Inattention (T = 83), and Hyperactivity/Impulsivity (T = 77). Mr. Bardwell also reported At-Risk concerns for Peer Relations (T = 69). Overall, Mr. Bardwell's responses on the *Conners-3* indicate that Kevin exhibits difficulties in learning, peer relations, attention, and hyperactivity/impulsivity, all of which are symptoms associated with autism and intellectual disability.

Conners, Third Edition – Teacher Short Form (Conners-3)

This measure is a narrowband, teacher-completed assessment of Kevin's current behavioral and social-emotional functioning related to symptoms associated with attention-deficit/hyperactivity disorder (ADHD). The *Conners-3* uses T-Scores with a mean of 50 and a standard deviation of 10. The validity indexes for the *Conners-3* were within the Acceptable range—suggesting that teacher responses are likely an accurate representation of Kevin's current behavioral and adaptive functioning. Ms. Malone's responses on the *Conners-3* indicate that Kevin exhibits Clinically Significant symptoms related to Inattention (T = 77), Hyperactivity/Impulsivity (T = 80), Learning Problems/Executive Functioning (T = 78), and Peer Relations (T = 73). She also reported nearly At-Risk concerns for Defiance/Aggression (T = 59). Overall, Ms. Malone's responses on the *Conners-3* support his current diagnoses of autism and intellectual disability.

Social Response Scale, Second Edition (SRS-2) - Parent

The *SRS-2* comprises 65 items to assess for problems related to autism spectrum disorder. Symptom areas include: Social Awareness, Social Cognition, Social Communication, Social Motivation, and Restricted Interests and Repetitive Behavior, as well as a Total Symptoms Score. The *SRS-2* also combines to form two subscales: Social Communication and Interaction and Restricted Interests and Repetitive Behaviors. Parents rate how true each behavior is on a scale from 1 (not true) to 4 (almost always true). The *SRS-2* uses T-scores, with a mean of 50 and a standard deviation of 10. Scores 59 and below are within normal limits; 60-65 are in the Mild range; 66-75 are in the Moderate range; and 76 and higher are in the Severe range. Ratings from Kevin's father placed him in the Mild range of the Total Symptoms Score (T = 60). Kevin's father's ratings also placed him in the Mild range for Social Awareness (T = 60), Social Motivation (T = 64), and Social Communication (T = 60). Overall, these scores suggest deficiencies in reciprocal social behavior that are clinically significant and may lead to mild to moderate interference with everyday social interactions. Ultimately, these ratings support his diagnosis of autism.

Social Response Scale, Second Edition (SRS-2) - Teacher

The *SRS-2* comprises 65 items to assess for problems related to autism spectrum disorder. Symptom areas include: Social Awareness, Social Cognition, Social Communication, Social Motivation, and Restricted Interests and Repetitive Behavior, as well as a Total Symptoms Score. The *SRS-2* also combines to form two subscales: Social Communication and Interaction and Restricted Interests and Repetitive Behaviors. Teachers rate how true each behavior is on a scale from 1 (not true) to 4 (almost always true). The *SRS-2* uses T-scores, with a mean of 50 and a standard deviation of 10. Scores 59 and below are within normal limits; 60-65 are in the Mild range; 66-75 are in the Moderate range; and 76 and higher are in the Severe range. Ratings from Kevin's teacher placed him in the Severe range of the Total Symptoms Score (T = 76). Ms. Malone's ratings also placed Kevin in the Moderate range for Social Awareness (T = 73), Social Motivation (T = 73), and Social Communication (T = 73); in the Severe range for Social Cognition (T = 76) and Restricted Interests and Repetitive Behavior (T = 75). Overall, these scores suggest deficiencies in reciprocal social behavior that are clinically significant and may lead to mild to moderate interference with everyday social interactions. Ultimately, these ratings support his diagnosis of autism.

Autism Diagnostic Observation Schedule, Second Edition (ADOS-2) – Module 1

The *ADOS-2* is a play-based assessment consisting of standard social interactions and activities that allow examiners to observe behaviors that have been identified as important to the diagnosis of ASD. The scoring algorithm used is dependent upon the verbal level of the child (either some words or few to no words). Based on Kevin's language abilities, his scores on the *ADOS-2* were derived using the Module 1 Some-Words Conversion Table. Both algorithms combine items from the social affect and restricted and repetitive

behaviors domains into a total score on which the cutoffs are based. In the 'some words' algorithm, a minimum score of 8 indicates autism spectrum and a score of 12 or more results in a classification of autism. In the 'few to no words' algorithm, a minimum of 11 is required for an autism spectrum classification and a total of 16 or more indicates classic autism. In both algorithms, individuals that do not meet the lower thresholds are classified as non-spectrum. The difference between autism and autism spectrum classifications is one of severity, with the former indicating more pronounced symptoms. Results are below:

Classification	Total Raw Score	Spectrum Cut-Score	Autism Cut-Score	Comparison Score	Level of ASD-Related Symptoms
Autism	11	8	12	5	Moderate

Kevin's total score on the *ADOS-2* was within the Autism range and indicated a **Moderate Level of ASD-related** symptoms. In the area of social communication, Kevin's vocalizations consisted of spontaneous single words/phrases (i.e., "car," "my turn," "watermelon, yum-yum"). Furthermore, Kevin used spontaneous gestures to communicate (i.e., blowing kisses, waving). Notably, Kevin pointed frequently as a means of communication during this assessment (i.e., pointing to request items on shelf, show items of interest to others, etc.). Regarding reciprocal social interaction, Kevin engaged in inconsistent and fleeting eye contact, which improved slightly as the session continued. Kevin initiated some interactions with others, but primarily to get his needs met (e.g., requesting a toy). Furthermore, Kevin generally did not ask permission to play with toys and often took them off the shelf independently. Kevin directed facial expressions to others to communicate a variety of emotions (e.g., confusion, happiness). He used limited vocalizations to communicate requests and did not combine requests with eye contact. Although able to use each independently, Kevin infrequently integrated eye contact, gaze, and gestures with vocalizations to communicate social intention. During interactive activities with the examiner (e.g., blowing bubbles, birthday party routine) and non-interactive parts of the assessment (e.g., free play with toys), Kevin displayed shared enjoyment. Additionally, Kevin was observed to show and give objects to others in a variety of situations and tasks. Kevin partially initiated joint attention (e.g., looked from item to other person, but not back to the item), but he responded to the examiner's bids for joint attention when the first time the examiner called his name and looked to the target (e.g., electronic bunny). In the area of restricted and repetitive behaviors, Kevin demonstrated stereotyped/idiosyncratic use of words and phrases. Specifically, Kevin frequently engaged in immediate and delayed echolalia, serving as most of his vocalizations. Sensory-related behaviors included covering his ears when he heard loud noises and blowing air from a rocket launcher into his face and ears. No hand or finger mannerisms were observed. During play, Kevin engaged in repetitive use of toys (e.g., lining up toys) and preoccupation with certain toys (e.g., toy food, cars). Kevin generally transitioned easily between tasks and limited rigidity was observed during today's session. Overall, Kevin demonstrated several behaviors throughout the *ADOS-2* that are consistent with ASD.

SUMMARY/CLINICAL IMPRESSIONS:

Kevin Bardwell is a 9-year, 2-month-old boy who was referred to IPS by his lawyer. Kevin's caregivers reported concerns due to speech/language delays, social deficits, inattention, hyperactivity, repetitive motor movements, sensory-related behaviors, and learning difficulties at home and school. During the session Kevin demonstrated limited communication skills, hyperactivity, repetitive behaviors, variable social skills, and difficulty sustaining attention.

With regard to social-emotional and behavioral functioning, results from the current evaluation suggest that Kevin displays several symptoms characteristic of ASD, and information obtained from parent reports, rating scales, and structured behavioral observations support significant deficits in social communication and interaction, sensory-related behaviors, and restricted and repetitive patterns of behavior. Specifically, Kevin demonstrated limited initiation of or response to social interactions. Kevin also demonstrated deficits in developing, maintaining, and understanding relationships. He was inconsistently interested in obtaining others' attention, often ignoring others, and happy sitting alone in the cafeteria. Kevin also demonstrated limited nonverbal communicative behaviors used for social interaction. Specifically, he did not consistently initiate eye contact during social interactions and did not combine gestures consistently with vocalizations.

In the area of restricted and repetitive behaviors, Kevin demonstrated stereotyped/idiosyncratic use of words and phrases. Specifically, Kevin frequently engaged in immediate and delayed echolalia, serving as most of his vocalizations. No hand or finger mannerisms were observed, but he has a history of hand flapping throughout development. During play, Kevin engaged in repetitive use of toys (e.g., lining up toys) and preoccupation with certain toys (e.g., toy food, cars). Sensory-related behaviors included covering his ears when he heard loud noises and blowing air from a rocket launcher into his face and ears. Given Kevin's reported and observed difficulties in social communication, restricted and repetitive behaviors, and sensory-related behaviors, he meets the criteria for the diagnosis of **Autism Spectrum Disorder (DSM-5, 299.00; ICD-10, F84.0)**, which partially explains his behavioral functioning. Overall, Kevin demonstrates extremely noticeable impairments in social communication, and he will require *substantial support* at home and school to develop successful social relationships. Furthermore, Kevin demonstrates restricted and repetitive behaviors that significantly interfere with his daily functioning and will require *substantial support* to reduce related impairments.

Results from this evaluation support the presence of significant deficits in intellectual abilities and adaptive functioning. Kevin's overall intellectual abilities were significantly delayed in comparison to same-aged peers as measured by the *CTONI-2*. Kevin's adaptive functioning was also significantly delayed in comparison to same-aged peers as measured by the *Vineland-3*. Furthermore, Kevin experiences deficits in the three core areas of daily functioning (i.e., social, conceptual, and practical) because of his intellectual and adaptive behavior delays. Regarding conceptual functioning, Kevin evidenced difficulties in cognitive and academic functioning in comparison to same-aged peers. For instance, he has difficulty naming the days of the week in order, answering "wh-" questions, and obeying common signs. In addition, Kevin will require *substantial support* to access specialized services to learn new concepts. Regarding his practical functioning, Kevin evidenced inconsistencies in his ability to complete age-appropriate personal (e.g., putting shoes on correct feet, checking appearance, and washing hair), domestic (e.g., showing respect when using other's possessions, helping with household chores), and community (e.g., ordering at a restaurant, finding a public restroom, and understanding safety concerns and behavior expectations) daily living tasks independently. Socially, Kevin prefers to play alone, demonstrates some difficulties coping with changes in routine, and struggles to make and keep friends. Taken together, these deficits in practical, conceptual, and social skills result in moderate impairment in Kevin's overall functioning. Overall, Kevin's intellectual abilities and adaptive functioning show that Kevin meets criteria for a diagnosis of **Intellectual Disability, Moderate (DSM-5, 315; ICD-10, F71)**.

According to caregiver reports, clinical observations, and structured testing, Kevin displays behaviors consistent with the core features of ADHD, including inattention, hyperactivity, and impulsivity at home and school. Furthermore, during the evaluation he required multiple prompts to stay on task or attend to presented stimuli, and he frequently became distracted by sounds outside of the room and items in the room and required repetition of instructions. Kevin also displayed excessive hyperactivity/impulsivity throughout the evaluation. He fidgeted in his seat, made noises with his mouth, and displayed out-of-seat behavior. He demonstrated impaired impulse control by constantly grabbing testing materials and walking away from the examiner while being asked questions. Overall, these behaviors moderately interfere with his ability to appropriately regulate his emotions and behaviors. As such, Kevin meets criteria for **Attention Deficit/Hyperactivity Disorder, Combined Presentation – Moderate (DSM-5, 314.01; ICD-10, F90.2)**, as it further explains his current behavioral and social difficulties.

DIAGNOSES:

Autism Spectrum Disorder (DSM-5, 299.00; ICD-10, F84.0);
 Requiring *substantial support* for deficits in social communication;
 Requiring *substantial support* for deficits in restricted, repetitive behaviors;
 With accompanying **Intellectual Disability, Moderate (DSM-5, 315; ICD-10, F71)**
 With accompanying language impairment;
 Associated with **Attention-Deficit/Hyperactivity Disorder, Combined Presentation – Moderate (DSM-5, 314.01; ICD-10, F90.2)**

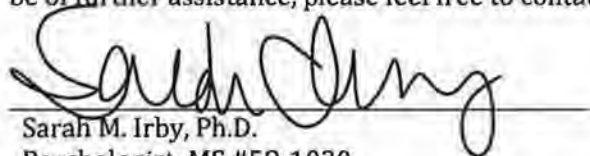
RECOMMENDATIONS:

Based on the results of the current evaluation, the following recommendations were made:

1. It is recommended that Kevin receive special education services through an Individualized Education Program (IEP) in the school system. More specifically, it is recommended that Kevin be enrolled in a classroom setting appropriate for a child with ASD, intellectual disabilities, and ADHD. Services should focus on behavioral, speech/language, and occupational therapies; self-help skills (e.g., feeding and dressing); and socialization skills.
 - a. To foster the development of Kevin's social skills, it is believed that he would benefit from receiving these services in a setting that also provides opportunities to interact with peers who do not have developmental delays.
 - i. Social skills to enhance participation in family, school, and community;
 - ii. Expressive verbal language, receptive language, and nonverbal communication skills;
 - iii. Increased engagement and flexibility in developmentally appropriate tasks and play, including the ability to attend to the environment and respond to an appropriate motivational system;
 - iv. Promoting behaviors that underlie success in education settings (e.g., completing tasks, following instructions in a group, requesting for help).
 - b. Based on Kevin's observed and diagnosed difficulties with attending, impulsivity, and hyperactivity, the following accommodations may be appropriate:
 - i. Kevin would benefit from additional **one-on-one support** from a teacher or classroom assistant to increase attention to task. As well as instruction in a small-group or low student to teacher ratio.
 - ii. Teachers should stand **near** Kevin while they provide **classroom instruction**.
 - iii. It is important that the environment around his seat has **minimal distractions**.
 - iv. Kevin should be **allowed extra time for completing activities**. Sometimes time constraints set up by teachers may not reflect the "real" time required by children with ADHD and ASD.
 - v. Kevin may benefit from **being a student helper** (e.g., flipping pages to a book; passing out materials for the teacher), which will keep her on-task and focused during an activity that requires sustained attention.
 - vi. Provide Kevin with a 5-minute, 2-minute, and then 1-minute **warning before a transition** occurs. Use of a timer may also be helpful in preparing him to finish a task.
 - vii. Visual reminders or a **visual daily schedule chart** placed on Kevin's desktop/table can be utilized to support his ability to focus.
 - viii. Kevin's caregivers and teachers should use **short and specific directions**.
 - ix. Use of **praise and rewards immediately** after Kevin has completed a task or followed a direction would also be effective in supporting his ability to attend.
 - c. If these accommodations do not fully address his behavioral difficulties, a **Functional Behavior Assessment (FBA)** is conducted. The FBA should be used to develop an individualized **Behavior Intervention Plan (BIP)** to increase Kevin's prosocial and positive behaviors in the school setting.
2. Given expressive/receptive language delays, Kevin would benefit from language therapy at school for **1-2 hours per week in a one-on-one setting**. In addition to school therapy, it may be beneficial for Kevin to receive **additional therapy through a local service provider** (e.g., Methodist Le Bonheur Outpatient, Building Blocks, TEAM Autism, Simple Strokes, etc.).
3. It is likely that Kevin will benefit from **Applied Behavior Analysis (ABA) therapy at school**, which supports the learning of new information (i.e., skill acquisition) through teaching and repetition using discrete-trials and natural environment teaching techniques. *Services should be provided under the supervision of a licensed behavior analyst.*
4. Kevin would benefit from an **occupational therapy evaluation** at school to determine if he needs support for sensory-related difficulties (e.g., aversion to certain sounds, sensory-seeking behaviors) and daily living skills (e.g., dressing himself).

5. Based on Kevin's noncompliance/defiant behaviors, **differential reinforcement** is an appropriate intervention to improve Kevin's behavior at home and school. Differential reinforcement entails **planned ignoring of negative, attention-seeking behaviors** (e.g., yelling, tantrums), and **immediate praise of positive behaviors** (e.g., following instructions, sharing).
 - a. Consistently **ignoring negative, attention-seeking behaviors will decrease** their occurrence and consistently and immediately **praising positive behaviors will increase** their occurrence.
 - i. For example, if Kevin is interrupting his parents when they are working, they can give one verbal prompt stating something like "I need to finish this I will talk to you in 2 minutes." and then return to their task. After this one prompt, any behaviors from Kevin to get their attention again should be ignored, including not responding verbally or nonverbally (e.g., with eye contact or facial expressions). It made be beneficial to set a timer so Kevin knows when he is able to interact with them again.
 - b. Differential reinforcement coupled with consistent implementation of time-out procedures for non-ignorable behaviors (e.g., aggression or dangerous behaviors) is likely to improve Kevin's behavior. It is important to note that this is an all or none process, and if attempted, needs to be always implemented.
 - c. Notably, when active ignoring is started, the behavior is placed on "extinction" and reinforcement (attention) is no longer provided. As such, an **extinction burst** is likely to occur, which will result in a brief escalation of problem behavior. See <https://www.bhwcare.com/extinction/> for more details.
6. Kevin exhibits several task avoidant and noncompliant behaviors. The following are suggestions for Kevin's family to implement in the home to help encourage prosocial behaviors:
 - a. Kevin will likely benefit from increased structure:
 - i. Develop routines for everyday activities and adhere to the routine whenever possible.
 - ii. When transitions are necessary, give reminders. For example, tell Kevin, "You have 5 more minutes to play, and then it will be time for dinner". Follow up with 2- and 1-minute reminders.
 - b. Kevin will also likely benefit from opportunities to have increased choice:
 - i. Although many activities are not optional, give Kevin choices about his daily schedule, dinner menu, etc. whenever possible.
 - ii. If he is resistant to a transition, offer a choice about what will occur next (e.g., "It is time to stop playing. You may either take a bath or brush your teeth now. Which would you like to do first?").
7. It is recommended that Kevin's family share the results of this evaluation with his pediatrician or a developmental pediatrician through Le Bonheur's Neurodevelopmental Disorder (NDD) Clinic in order to discuss treatment options for ADHD and monitor his symptoms of ASD.
8. Given the diagnosis of ASD, it is recommended that Kevin share the results of this evaluation with his pediatrician and discuss a referral to genetics for a chromosomal microarray and Fragile X testing, in addition to follow-up testing if initial assessment is inconclusive.
9. Furthermore, it is recommended that the family contact Support and Training for Exceptional Parents (STEP; 1-800-280-7837, www.tnstep.org) for information, advocacy training, and support services eligible to parents of children receiving special education services under the Individuals with Disabilities Education Act (IDEA).

It was a pleasure to work with Kevin. If there are questions regarding the status of your report, or if we can be of further assistance, please feel free to contact IPS at the number above.



Sarah M. Irby, Ph.D.
Psychologist: MS #58-1020
Board Certified Behavior Analyst



Individual Family Service Plan (Periodic)

Student: KEVIN BARDWELL

Date of Birth: Nov 5, 2012

Grade: ECSE

Family Language: English

Date of Consent for Evaluation: 2014-07-17

Additional Language:

Date MDT: 2014-08-21

EDN Referral Date:

Family would like an Interpreter: No

Parent(s)/Guardian

Name: Kevin Bardwell Sr.

Role: Parent

Address: 1217 Madison Avenue Norfolk, NE 68701

Home phone:

Work phone:

Name: Antoinette Brandy

Role: Parent

Address: 1217 Madison Avenue Norfolk, NE 68701

Home phone: 402-640-8206

Work phone:

Services Coordinator / Case Manager Information

Name: Margaret A. Jensen

Address: 1405 Riverside Blvd., PO Box 293, Norfolk, NE 68702-0293

Phone: 402-371-7284

Agency: Northeast Nebraska Community
Action Partnership / NENCAP

IFSP Meeting Dates

Type	Date	Date Sent
Periodic	2015-02-05	2015-02-12

IFSP Previous Meeting Dates

Type	Date	Date Sent
No previous meeting dates found.		

Date	Family Concerns
	<p>Priority: Find out more about Kevin's hearing. Check out options for resources if he has a hearing loss.</p> <p>Update: Kevin was seen at Boys Town on August 22. The tests indicated that left ear finding suggests normal high frequency hearing sensitivity and mid low-to-mid frequency hearing loss. Right ear findings suggest normal to near normal hearing sensitivity. Boys Town recommended that he be followed by EDN due to significant delay in speech and language development. They also recommended that hearing sensitivity and middle ear status be monitored and his hearing be followed closely.</p> <p>The results of the hearing test was shared with NPS teachers of deaf and hard of hearing.</p> <p>Plan: His hearing will be monitored by Melissa Jantz.</p> <p>Priority: Figure out ways to keep Kevin occupied so he is not preoccupied with eating cotton.</p> <p>Update: Kevin still picks at the furniture and eats the stuffing once in awhile but not as much as before. He eats crayons, pencil eraser, his sister's lip gloss. He finds the tiniest little things on the floor and puts them in his mouth.</p> <p>Plan: Continue to find ways to keep him occupied and not putting things in his mouth.</p> <p>Priority: Explore activities that will help Kevin talk more and interact more with his family. Focus on activities that will help Kevin communicate what he wants and needs.</p> <p>Update: Kevin communicates his wants and needs in a variety of ways. He pushes his parents to the kitchen when he wants something. He cries if they leave the kitchen and haven't given him what he wants. He drops to the floor when he doesn't want to go where you are taking him. He stares at what he wants. He makes a different sound for wanting a drink or something to eat. He is beginning to reach for what he wants when offered a choice of two snacks.</p> <p>Plan: Continue to focus on ways to help Kevin communicate what he wants and needs.</p>
Feb 5, 2015	<p>Priority: Review options for resources that will help the family.</p> <p>Driver's License: Kevin has contacted sources in Chicago. He needs to reopen his case there. He is working on that.</p> <p>Landlord: The landlord tenant handbook was shared with the family. They would prefer to stay in their current home since it is large enough to meet their needs.</p> <p>Kevin's vision: Information about the Vision USA program was shared. Kevin contacted them and is in the process of providing the income verification needed.</p> <p>Legal issues: Kevin will just have a fine.</p> <p>SSI-DCP: Kevin Jr. is eligible for SSI and the SSI-DCP program. He and his sister, Janiah, receive respite care funding through the SSI-DCP program. Antoinette is familiar with Jeanette Hastings, SSI-DCP Case Worker, and how the SSI-DCP program works.</p> <p>Plan: Continue to review needs and options for resources.</p> <p>Kevin may have surgery on the second toe on his right foot. He will see a bone specialist at the burn clinic in Lincoln next week. The specialist will determine what will be done.</p> <p>Plan: Antoinette will keep the team informed about the plan.</p> <p>Antoinette is wondering about potty training for Kevin.</p> <p>Plan: Explore strategies when Antoinette is ready to start potty training.</p>

Previous IFSPs

Date	Previous IFSP Text:

Antoinette and Kevin Sr. noticed that, like his sister, Jania, Kevin Jr. was not responding to his name and sounds in home. They are concerned about his hearing. Kevin does not like having his ears touched so a hearing test at Norfolk ENT was not successful. He will be sedated for a hearing test at Boys Town west campus on August 22nd.
Priority: Find out more about Kevin's hearing. Check out options for resources if he has a hearing loss.

Kevin Sr. and Antoinette shared that Kevin eats non-food items. They have to monitor him closely or he will pick at the mattress or couch until he makes a hole. He eats the stuffing.
Priority: Figure out ways to keep Kevin occupied so he is not preoccupied with eating cotton.

Antoinette and Kevin are concerned that Kevin is not talking. They don't know when he is hungry because he never asks for food. They keep food available for him around the house so he can find it when he is hungry. They notice that he is in his own little world and doesn't interact with his brother, Kevvon. Kevin Sr. shared that Kevin doesn't respond back and forth with them, e.g., repeating words, making sounds. They would like Kevin to interact more with them and his siblings.
Priority: Explore activities that will help Kevin talk more and interact more with his family. Focus on activities that will help Kevin communicate what he wants and needs.

Kevin prefers being at home. He does not like going outside. He cries the whole time when they go to the park. When the older children are home and can watch him, they leave him at home while the family goes to the park.

Kevin would like to know more about options for resource.
-His driver's license was suspended in Chicago. He would really like to get his driver's license so he wouldn't have to walk to work and be able to take advantage of more employment opportunities.
-He wonders about what their landlord is required to do around the house and what they are required to do. He likes the house they are living in because it is big enough for their family.
-Kevin is concerned about his vision. He'd like to see better.
Priority: Review options for resources that will help the family.

2014-08-21

Date	Child Strengths
Feb 5, 2015	<p>2-5-15</p> <p>Baby KaAliyah joined the family on January 7th. She is a good baby.</p> <p>Antoinette returned to work at McDonald's on February 3rd following maternity leave.</p> <p>Kevin is showing more interest in his toys now. He loves his blocks. He loves bath time and notices every opportunity to climb in the tub.</p> <p>He is persistent when communicating what he wants. He communicates what he wants and doesn't want in a variety of ways, e.g., covers his ears, drops to the floor, stares at what he wants, pats your legs.</p> <p>He notices Melissa's bag when she arrives for a home visit now. He is interested in what's in the bag.</p> <p>He is interacting more with KJ now. He notices what KJ is doing and is beginning to imitate what he is doing. He is doing some activities on his own now instead of wanting you to do it, e.g. writing with the pen.</p> <p>Kevin Sr. and Antoinette are focusing on specific activities, e.g., calling his name, making eye contact when offering choices, giving his choices.</p> <p>Kevin's siblings are aware of his needs, e.g., everyone is aware that loud noises are hard for Kevin.</p> <p>Kevin and Antoinette notice the difference in how Kevin is making some sounds and that each way means something different, e.g., drink or hunger.</p>

Previous IFSPs

Date	Previous IFSP Text:
2014-08-21	<p>Kevin:</p> <p>He no longer has to go to medical physical therapy for his feet.</p> <p>He finger feeds himself. He finds his sippy cup and food that his parents make available to him during the day.</p> <p>He stops what he is doing when Antoinette says, "Aa Aa Aa" or Kevin Sr. thumps his fingers.</p> <p>He loves bath time.</p> <p>His gross and fine motor skills are appropriate for his age.</p> <p>He has a good memory.</p> <p>He figures out ways to get what he wants.</p> <p>Family:</p> <p>Kevin Sr. and Antoinette both want to know what they can do to help Kevin.</p> <p>Antoinette shared that she is relieved to know that Kevin qualifies for services because she saw how services helped Janiah.</p> <p>Kevin and Antoinette's work schedules allow one of them to be home with the children. Asha Stewart cares for the little boys when needed.</p> <p>Kevin's siblings help monitor what he is doing and alert their parents when he is getting into things.</p> <p>Antoinette's cousins watch Kevin when they can so he can stay home when the family goes to the park.</p> <p>The family has a daily routine that works for them. The children know the routine.</p> <p>Kevin Sr. and Antoinette work together and know what the children want to do.</p> <p>Kevin has a dream of working for himself and starting his own business.</p>

Periodic IFSP - Child's Present Levels of Development

Date	Vision
Feb 5, 2015	Vision is not a concern at this time. Kevin can still spot the tiniest thing on the floor even when no one else sees it. He likes to watch the Baby First Channel.

Previous IFSPs

Date	Previous IFSP Text:
2014-08-21	Vision is not a concern at this time. Kevin sees the tiniest little things, e.g., crumbs.

Date	Hearing
Feb 5, 2015	Kevin covers his ears with his hands when noises are too loud, e.g. yelling or speaking loudly. When a noise is too loud, he covers his ears, runs and screams. If Kevin is in the living room and he hears the Baby First Channel's music in the bedroom, he runs to the bedroom. He responds when he hears Antoinette say "Pat-a-Cake" and "Peek-a-Boo." When he hears the water running, he knows it is bath time.

Previous IFSPs

Date	Previous IFSP Text:
2014-08-21	Kevin passed the newborn hearing screening. There are concerns about his hearing due to a sibling with hearing loss. His parents notice that he does not respond to sounds in his home. He does not come when called. A hearing test was attempted at Norfolk ENT on August 4th. That was not successful because Kevin does not like having his ears touched. A sedated ABR is scheduled on August 22nd on west campus of Boys Town National Research Hospital. Kevin Sr. shared that some days Kevin will do exactly what he says but he doesn't know if Kevin Jr. understands.

Date	Health Status
Feb 5, 2015	<p>Dr. Pierce continues to monitor Kevin's health. He weighs 23 pounds. He is current on his immunizations. He participates in the WIC program.</p> <p>He doesn't wear the compression socks any more. His skin looks excellent and is smooth.</p> <p>Kevin may have surgery on the second toe on the right foot. He is scheduled to see a bone specialist at the clinic in Lincoln next week. The condition of the toe is throwing off his balance. Antoinette shared that the "bone is off track". Medical physical therapy was initiated to address the issue but stopped went it wasn't helping the issue.</p>

Previous IFSPs

Date	Previous IFSP Text:
2014-08-21	<p>Dr. Erin Pierce monitors Kevin's health locally. He is current on his immunizations. He participates in the WIC program.</p> <p>Antoinette estimated that he weighs about 24 pounds.</p> <p>Kevin was severely burned on his feet in February 2014. He's has two surgeries on his feet. Skin from his thigh was grafted to his feet. Antoinette puts lotion on his feet. He wears special socks on both feet all the time.</p>

Date	Cognitive / Thinking Skills
Feb 5, 2015	<p>Kevin pulls out the kitchen drawers so he can climb up to get what's on the counter.</p> <p>He is more observant of what is happening around him now, e.g., watched KJ drop things through the handle of the push toy and then did it himself; watched where his sister was getting the pencils and go into them himself.</p> <p>Kevin is starting to imitate more. He imitates his siblings when he sees them dancing to the Just Dance video, e.g., he turns around in circles.</p> <p>Kevin remembers how you use your hands to erase things on the phone so he takes your hand and wants you to erase things on paper.</p> <p>He is more interested in his toys now. He sits down and tries to figure them out. Antoinette shared that he was always given a truck in a box at the specialist's office in Lincoln. In the past he didn't pay attention to it. At his last visit, he pushed the truck around.</p> <p>He loves phones and knows that he has to swipe the screen.</p> <p>He is working on making eye contact when given the choice between two snacks. He is beginning to reach for what he wants when given two choices. Everyone is working on getting him to point to what he wants.</p> <p>If his parents take his clothes off in the living room, Kevin runs to the bath room because he knows it means that it is bath time.</p> <p>He uses the phone's stylus to color on the phone.</p>

Previous IFSPs

Date	Previous IFSP Text:
2014-08-21	<p>Kevin likes the Baby First Channel.</p> <p>Kevin likes the wagon. He pulls it around and climbs in and out of it.</p> <p>Kevin mostly roams around the house during the day.</p> <p>He hides pieces of cotton so he can get them later.</p> <p>He is observant and has a good memory. He remembers where his parents put things.</p> <p>He pushes something around to stand on to get to things out of reach.</p> <p>He plays little games with his parents, e.g., plays Peek-a-Boo by pulling a blanket off his head.</p>

Date	Communication Skills
Feb 5, 2015	<p>Kevin cries to get something. If he cries because he wants something he is not supposed to have e.g., a pencil, he gets over it quickly if the object is out of his view.</p> <p>Kevin Sr. and Antoinette are really working on calling Kevin's name and getting him to respond to it. He responded to his father a couple of times but has not consistently responded when called.</p> <p>Antoinette notices that Kevin says, "ooo ooo" differently for different wants. If he says, "oooo ooo" he wants a drink. If he says it more slowly, he is hungry.</p> <p>He is starting to make more sounds. He makes a low humming sound. He says, "mmmm, aaaaa, ooooo". He makes a whining and squealing sound.</p> <p>If Kevin wants something in the kitchen, he gets mad if you walk off before getting it for him.</p> <p>Kevin drops to the floor when he doesn't want to go where you are taking him.</p> <p>He communicated that he wanted to continue a little game where Antoinette smelled his feet by lifting his foot multiple times.</p> <p>Kevin pats his father's leg when he wants something in the kitchen. If his father doesn't get up immediately, Kevin goes to the kitchen and sits down. He stares at what he wants.</p>

Previous IFSPs

Date	Previous IFSP Text:
2014-08-21	<p>Kevin makes noises but isn't babbling.</p> <p>He laughs at what he sees, e.g., Kevin playing with a balloon.</p> <p>Kevin whines when he can't get what he wants. He cries when he is upset.</p> <p>He stops what he is doing when Antoinette says, "Aa Aa A" loudly. He looks at her, cries and walks away. He stops what he is doing when his father thumps his fingers.</p> <p>He touches you to indicate that he wants you to repeat an activity.</p>

Date	Social / Behavior Skills
Feb 5, 2015	<p>Kevin eats the erasers off of pencils. He eats crayons. He puts anything he finds into his mouth. He ate his sister's lip gloss.</p> <p>He doesn't just wander around as much now. He is watching the TV or going to get a toy.</p> <p>He interacts more with KJ now, e.g., KJ started to run with popper toy. When he stopped, Kevin looked for him and laughed. Kevin kept the activity going by looking for KJ and laughing when he stopped.</p> <p>He still doesn't like going out. At the doctor's office, he played with the toys for a little bit and then walked along the wall.</p> <p>Antoinette shared that Kevin's memory is short, e.g., he may be playing with his blocks, want more but forgets that he went into the bedroom to get more blocks. He gets distracted with something else.</p> <p>Kevin occasionally has some repetitive behaviors but they are not as long now.</p> <p>He slides his head on the floor. He bear crawls with his head on the floor. Joint compressions are being tried to help decrease that behavior.</p> <p>Sleeping is going better with the TV turned off. Having the room dark helps him go to sleep. The weighted blanket seems to help Kevin sleep better.</p> <p>If Kevin sleeps until noon, he wants to take a nap at 6:00 pm and then won't go to bed until midnight. Antoinette is working on getting him up earlier in the morning so he naps earlier and goes to bed earlier. She shared that Kevin would sleep a long time if she let him.</p> <p>He snuggles with Antoinette.</p>

Previous IFSPs

Date

Previous IFSP Text:

Kevin prefers to play alone. He puts his cars in his mouth when playing with them. Kevin likes to eat soft non-food items. He will pick at the couch or mattress until he makes a hole and he eats the stuffing. He plays with the cotton in his mouth until it gets soggy before he swallows it if no one is watching him. If his parents see the cotton in his mouth and respond, he swallows it immediately. If he can, he will put cotton in different places so he can get it later. Kevin sleeps with his parents. That makes it easier for them to monitor where he is and what he is doing. Sometimes he moans when he wakes but he usually doesn't say anything when he wakes. Sometimes he watches TV when he wakes and other times he just lays in the bed.

2014-08-21

Bedtime for Kevin and his brother, Kevvon, is 8:00 pm. They watch their favorite TV shows until falling asleep. They are both usually asleep by 9:00 pm. Kevin sleeps through the night. He takes a nap in the afternoon. Some mornings, Kevin will sleep as late as 10:30 or 11:00. The time of nap varies depending on when he wakes in the morning. Kevin does not like being outside. He prefers to be at home. He cries the whole time when the family goes to the park. He doesn't cry when the family goes swimming but he clings to Antoinette and she knows he doesn't like it. He calms down when his parents comfort him. Kevin Sr. shared that little Kevin knows when he's done something wrong because he doesn't whine as much when corrected.

Date	Self-Help / Adaptive Skills
Feb 5, 2015	<p>Kevin does not like wearing shoes and socks. If you can get his shoes on him and get him to walk around in them, he is OK. He hates wearing a coat. If you put a hat on his head, he snatches it right off. He prefers to wear sweats and pajamas. Kevin can take all articles of clothing off quickly.</p> <p>Kevin does not like getting his hair cut.</p> <p>Kevin loves bath time. He climbs into the tub by himself. When his sister left her bath water unattended for just a minute, Kevin climbed into the tub fully clothed. Getting Kevin out of the tub at the end of bath time is a challenge.</p> <p>Kevin likes a limited number of foods. His favorites include yogurt, oatmeal and cereal. He only likes regular Cheerios and Captain Crunch. He will eat a little bit of macaroni. He eats his cereal with milk. Sometimes he tries to use a spoon. Most of time, Antoinette feeds him. He will finger feed himself but he wants to dump the food out.</p> <p>Kevin likes cups with straws. At his brother's basketball game, he eased his way down from his parents so he could get to people's cups. He can drink from a regular cup without assistance. He is learning to not throw the cup when he is done drinking.</p>

Previous IFSPs

Date	Previous IFSP Text:
2014-08-21	<p>Kevin finger feeds himself. He doesn't want anyone to feed him. If given a spoon, he throws it. He sits in a high chair during meal time. Antoinette puts food on his tray until he indicates he is done by throwing the food on the floor. He sits in the high chair until they take him out. If he gets impatient, he tries to climb out of the high chair on his own. Kevin does not ask for food or indicate that he is hungry so his parents make food available to him during the day. If he is hungry and food is available, he will eat it.</p> <p>Kevin can take all articles of clothing off and he can be quick about it. He allows his parents to dress him and he assists by pushing his arms through. He is not yet lifting his legs when they put his pants and shorts on.</p> <p>Kevin likes bath time. He could stay in the bath tub for 20 to 30 minutes splashing and playing with his bath toys.</p>

Date	Fine Motor Skills
Feb 5, 2015	<p>Kevin writes on the wall when he finds a pencil.</p> <p>He likes blocks and can stack a lot of them.</p> <p>Kevin puts his hands on Antoinette's hands when they play Pat-a-Cake.</p> <p>He grabs your hand to get you to help him, e.g., hold the pen.</p> <p>He claps his hands.</p> <p>He holds the phone's stylus with a nice looking tripod grip. He mostly uses his left hand. When he shifted the stylus to the right hand, he used a fist grip.</p>

Previous IFSPs

Date	Previous IFSP Text:
2014-08-21	<p>Kevin's fine motor skills are a strength. They are appropriate for his age.</p> <p>Kevin picks at objects until he makes a hole. He pushes buttons. He turns door knobs. He picks up tiny little crumbs.</p>

Date	Gross Motor Skills
Feb 5, 2015	Kevin turns around in circles until he makes himself dizzy. He likes to swing. He tries to get out the door but isn't able to open the door by himself yet. Antoinette shared that, "He runs like a champ." He walks, runs and climbs. He crawls up and down the stairs on his hands and knees.

Previous IFSPs

Date	Previous IFSP Text:
2014-08-21	Kevin's gross motor skills are a strength. They are appropriate for his age. Kevin walks and runs. He crawls up the steps on his hands and knees. His parents usually carry him down the steps or he bumps down, facing forward, on his bottom. He squats to look at things and stands up without support. He climbs on the bike.

Goal #1**Goal outcome:**

Kevin will participate in play time by communicating his wants. We will know he can do this when he looks at or points to a toy two times during a play activity.

Child / Family strengths and resources related to this goal:

Antoinette and Kevin are open to sharing their questions and needs.

They are willing to try new things to help Kevin progress.

They have experience with special education services and being an advocate for their children.

They have many people in the household that can help with strategies set for Kevin Jr. to meet his goals.

Kevin's Early Development Network providers are knowledgeable about resources and willing to share information and seek out information to help Antoinette and Kevin.

What will be done / by whom:

Kevin Sr. and Antoinette will:

Follow through with recommendations to find activities that will fit into their daily routine.

Assist with scheduling visits and meetings so that services can be provided.

Share their questions and concerns.

Melissa, Early Childhood Special Educator, will:

Monitor and track overall development with Kevin Sr. and Antoinette.

Provide information to parents and providers about activities to promote overall development focusing on activities that will help Kevin begin to communicate.

Demonstrate strategies and activities that the family can implement within their daily routine to benefit Kevin Jr.

Margaret, Services Coordinator will:

Have monthly contact with Kevin Sr. and Antoinette to review questions and needs.

Consult with Melissa about services and needs related to helping Kevin Sr. and Antoinette accomplish the IFS² goals set for Kevin Jr..

Coordinate the arrangements for meetings and facilitate communication with Kevin's team.

Progress will be reviewed
6 months

By Whom

Parents, Early Childhood Special Educator, and EDN
Services Coordinator

How Measured

Parent Report, Observation, and Information Shared

Plan Review for this Goal
02/20/2015

Goal progress:

8-21-14 New Goal

2-5-15 Update:

Kevin Jr. is demonstrating his wants and needs by using grunts and pushing his parents to what he wants. If he wants something to eat or drink he will push his mom or dad into the kitchen. When given two food options, Kevin will reach for the item he wants but is not yet forming a point. In play time, Kevin will reach for a toy that he wants to play with. He will not point to the item and often times does not make eye contact when making a choice. When the item is brought closer to the adult's face, he will make a fleeting glance to the person's face but then quickly return his focus to the item that he wants.

Goal comments:

8-21-14 New Goal

2-5-15 Update:

This goal will be continued with the focus on Kevin Jr. using a purposeful point toward the item that he is choosing while making eye contact with the individual he is communicating with.

Goal #2**Goal outcome:**

Antoinette and Kevin Sr. will have information about resources as they care for Kevin and their family.

Child / Family strengths and resources related to this goal:

Antoinette and Kevin are open to sharing their questions and needs.

They are familiar with the community.

They have experience with special education services and being an advocate for their children.

Kevin's Early Development Network providers are knowledgeable about resources and willing to share information and seek out information to help Antoinette and Kevin.

What will be done / by whom:

Kevin and Antoinette will:

-Share their questions and needs.

-Choose what resources they want to pursue and provide the information needed to access those services.

Margaret and Melissa will:

-Review questions and needs during visits.

-Provide or seek out information regarding the needs that Kevin Sr. and Antoinette share.

-Assist, as needed, to help Antoinette and Kevin to access the services, programs and resources they want to pursue

Progress will be reviewed
in 6 months

By Whom

Parents, Early Childhood Special Educator and EDN
Services Coordinator

How Measured

Information shared and resources identified.

Plan Review for this Goal
02/20/2015

Goal progress:

8-21-14 New Goal.

2-5-15 Update:

Antoinette is very good about sharing information about Kevin. She shares her questions and concerns. Resources are identified as needed. Kevin Jr. is now eligible for SSI. Antoinette is familiar with SSI and the SSI-DCP program because Kevin's sister receives the benefits. Jeanette Hastings, SSI-DCP Case Worker, has been in contact with the family and signed Kevin up for services through SSI-DCP.

The option of participating in the St. Nick program at Christmas time was offered and Antoinette chose to participate. Antoinette shared that the gifts were good and what they requested.

Kevin Sr. was referred for the Vision USA program for assistance with an eye exam and glasses if needed. He is still in the process of

providing the information to document income eligibility.

Information about Planning Region 29 and funding options for training is shared. Information about community events is shared.

Goal comments:

8-21-14 New Goal.

2-5-15 Update:

We will continue to review needs and options for services. We will review the changes that accompany the transition to Part B educational services.

Antoinette and Kevin Sr. will be invited to participate in the 2015 Family Survey. They will be invited to the PRT Annual meeting in April.

Goal #3**Goal outcome:**

Kevin will participate in meal time by responding to his name. We will know he can do this when he looks at a family member who has called his name and touched his arm one time during one meal per day.

Child / Family strengths and resources related to this goal:

Antoinette and Kevin are open to sharing their questions and needs.

They are willing to try new things to help Kevin progress.

They have experience with special education services and being an advocate for their children.

They have many people in the household that can help with strategies set for Kevin Jr. to meet his goals.

Kevin's Early Development Network providers are knowledgeable about resources and willing to share information and seek out information to help Antoinette and Kevin.

What will be done / by whom:

Kevin Sr. and Antoinette will:

Follow through with recommendations to find activities that will fit into their daily routine.

Assist with scheduling visits and meetings so that services can be provided.

Share their questions and concerns.

Melissa, Early Childhood Special Educator, will:

Monitor and track overall development with Kevin Sr. and Antoinette.

Provide information to parents and providers about activities to promote overall development focusing on activities that will help Kevin begin to communicate.

Demonstrate strategies and activities that the family can implement within their daily routine to benefit Kevin Jr.

Margaret, Services Coordinator will:

Have monthly contact with Kevin Sr. and Antoinette to review questions and needs.

Consult with Melissa about services and needs related to helping Kevin Sr. and Antoinette accomplish the IFSP goals set for Kevin Jr..

Coordinate the arrangements for meetings and facilitate communication with Kevin's team.

Progress will be reviewed
6 months

By Whom
Parents, Early Childhood Special Educator, and EDN
Services Coordinator

How Measured
Parent Report, Observation, and Information Shared

Plan Review for this Goal

02/20/2015

Goal progress:

8-21-14 New Goal

2-5-15 Update:

Antoinette has shared that Kevin Jr. has turned to Kevin Sr. calling his name a couple of times but it is not consistent. Antoinette and Kevin Sr. are working on this throughout all daily experiences. Kevin does show occasional response to some of the noises that his mother and father make when he is doing something he is not supposed to do. If they do a loud, "Ah, ah, ah" he will typically stop touching the buttons on the television.

Goal comments:

8-21-14 New Goal

2-5-15 Update:

This goal will be continued. The family will continue to practice and reinforce this skill throughout their daily routines.

Goal #4**Goal outcome:**

Kevin will participate in bath time by imitating. We will know he can do when he copies the actions or sounds he sees and hears his brother Kevvon doing at least two times during a bath.

Child / Family strengths and resources related to this goal:

Antoinette and Kevin are open to sharing their questions and needs.

They are willing to try new things to help Kevin progress.

They have experience with special education services and being an advocate for their children.

They have many people in the household that can help with strategies set for Kevin Jr. to meet his goals.

Kevin's Early Development Network providers are knowledgeable about resources and willing to share information and seek out information to help Antoinette and Kevin.

What will be done / by whom:

Kevin Sr. and Antoinette will:

Follow through with recommendations to find activities that will fit into their daily routine.

Assist with scheduling visits and meetings so that services can be provided.

Share their questions and concerns.

Melissa, Early Childhood Special Educator, will:

Monitor and track overall development with Kevin Sr. and Antoinette.

Provide information to parents and providers about activities to promote overall development focusing on activities that will help Kevin begin to communicate.

Demonstrate strategies and activities that the family can implement within their daily routine to benefit Kevin Jr.

Margaret, Services Coordinator will:

Have monthly contact with Kevin Sr. and Antoinette to review questions and needs.

Consult with Melissa about services and needs related to helping Kevin Sr. and Antoinette accomplish the IFSP goals set for Kevin Jr.

Coordinate the arrangements for meetings and facilitate communication with Kevin's team.

Progress will be reviewed

6 months

By Whom

Parents, Early Childhood Special Educator, and EDN Services Coordinator

How Measured

Parent Report, Observation, and Information Shared

Plan Review for this Goal

02/20/2015

Goal progress:

8-21-14 New Goal

2-5-15 Update:

During bath time, Kevin Jr. is very focused on playing, splashing, and pouring water. He is not demonstrating imitation skills during this time period but imitation is being noted in other portions of the day. During play time, he will imitate things that his brother KJ is doing. For example, when KJ drops blocks through the handle of a push toy, Kevin will observe for a short period of time and then try the same thing.

When his mother does patty cake, he will place his hands on the outside of hers to do the clapping along with her.

Goal comments:

8-21-14 New Goal

2-5-15 Update:

This goal was originally written to highlight bath time because that was one portion of the day that Kevin appeared to enjoy. To broaden this goal, we will focus on expanding Kevin's imitation skills across all parts of his day over the next 6 month period.

Are there special conditions for safe transportation for this child?

Kevin uses a standard car seat.

Services**Service:**

Special Instruction

Setting:

Home

How often?

12 days/6 month period

How much?

60 min/day

Group/Individual

Individual

Natural Environment

Yes

When service Starts and Ends?

Feb 12, 2015 - Aug 5, 2015

Who Pays?

School district

Responsible?

Teacher

The method of delivery for Part C services will be in person services.**Service:**

Services coordination

Setting:

Home

How often?

1 days/month

How much?

15 min/day

Group/Individual

Individual

Natural Environment

Yes

When service Starts and Ends?

Feb 5, 2015 - Aug 5, 2015

Who Pays?

Early Development Network

Responsible?

Services Coordinator

The method of delivery for Part C services will be in person services.

Transition Conference Date:

Feb 5, 2015

Estimated Transition Date:

Aug 31, 2016

Transition Plan**Transition Plan Step 1:**

Kevin will be three years old on November 5th, 2015. If he continues to qualify for Early Development Network services at that time, his EDN team will create an appropriate transition plan to Part B educational services.

Kevin Sr. and Antoinette will keep the team informed about any changes or transitions that would affect services in the meantime, e.g., moves, changes in contact information, hospitalizations.

Who is responsible?

Kevin's EDN team includes: Parents, Early Childhood Special Educator, EDN Services Coordinator,

Time Line

02/20/2015

Date Completed

02/05/2015

Transition Plan Step 2:

Baby KaAliyah joined the family on January 7th.

90 days before Kevin's third birthday is August 5th, 2015. Time line and process for transition to Part B educational services was reviewed. Antoinette is interested in preschool for him. Melissa and Antoinette will discuss options for Kevin to practice leaving the house since he is not comfortable doing that. They will review options for him to visit the playground since he likes swinging. Melissa will check out the option of Kevin having some of his visits during summer preschool hours so that he can be exposed to other children and experience the classroom environment. We will finalize his transition plan when we meet for his Annual Review in August.

Kevin may have surgery on his foot. Antoinette will keep the team informed about the possibility after she meets with the specialist.

Antoinette does not anticipate any other changes or transitions in the next six months.

Who is responsible?

Team

Time Line

08/05/2015

Date Completed**Family Choice: Consent to the continuation of early intervention services or initiation of Special Education services**

- I/We have received a copy of the Annual Transition Notice.
- I/We have been informed about the differences between, and the right to choose, early intervention services provided through an IFSP under the Individuals with Disabilities Education Act (IDEA) and the preschool special education services provided through an Individualized Education Program (IEP) under IDEA once my/our child reaches age 3.
- I/We understand that if I/we choose for my/our child to receive special education services through an IEP, my child and family will no longer receive early intervention services nor will receive early intervention services coordination.

- I/We understand that if I/we choose for my/our child to continue to receive early intervention services through an IFSP, at any time I/we may elect to receive special education preschool services instead of early intervention services.
- I/We understand that my/our consent to the continuation of early intervention services is voluntary and that I/we may revoke consent at any time.

☐ Yes ☐ No I/We consent to the continuation of early intervention services for my/our child and family through an IFSP after my/our child's third birthday.

☐ Yes ☐ No I/We request initiation of preschool special education services for my/our child and family at or after age 3.

Parents / Guardian Signature

Parent Signature 1

Date

Parent Signature 1 On File

Parent Signature 2

Date

Parent Signature 2 On File

(If 'No' selected above, please explain)

--

Team Members Present at the Meeting:

Name	Role	Address
Antoinette Brandy	Parent	1217 Madison Ave. Norfolk, NE 68701 402-640-8206
Name	Role	Address
Melissa Jantz	Early Childhood Special Educator/District Representative	310 S 3rd St., PO Box 139, Norfolk, NE 68702-0139 402-644-2550
Name	Role	Address
Margaret Jensen	Service Coordinator	1405 Riverside Blvd., PO Box 293, Norfolk, NE 68702-0293 402-371-7284

Others who are part of the Child/Family Team:

Name	Role	Address
Erin Pierce, M.D.	Pediatrician	301 N 27th St. Suite #1, Norfolk, NE 68701 402-844-8021
Family initial for copy of pages sent		
A.B.		

Parents / Family Informed Consent

The early intervention services will be provided as described in the IFSP and must begin no later than 30 days from the date of my/our written consent. I/We understand that the IFSP will be reviewed at least every six (6) months.

- I/We understand that a copy of the IFSP, evaluation, child assessment and family assessment will be distributed within 7 calendar days.
- I/We understand that my/our consent is voluntary and that I/we may revoke consent at any time.
- I/We have been informed of the determination(s) of the IFSP team in my/our native language or other mode of communication.
- I/We understand we can accept or decline any service listed in the IFSP without jeopardizing receipt of other services we accept in the plan.

Parents / Guardian Signature

I/We understand the plan and parental rights and give permission to implement this IFSP, and give consent for all services in the IFSP.

Parent Signature 1
Antoinette Brandy

Parent Signature Date 1
2015-02-05

Parent Signature 1
Yes

Parent Signature 2

Parent Signature Date 2

Parent Signature 2
No

(If 'No' selected above, please explain):

Any Comments:

I/We do not agree with the proposed IFSP as written. However, I/we do consent to the following services/frequency:

Parent Signature 1

Parent Signature Date 1

Parent Signature 1
No

Parent Signature 2

Parent Signature Date 2

Parent Signature 2
No



Individual Family Service Plan (Periodic)

Student: KEVIN BARDWELL

Date of Birth: Nov 5, 2012

Grade: ECSE

Family Language: English

Date of Consent for Evaluation: 2014-07-17

Additional Language:

Date MDT: 2014-08-21

EDN Referral Date:

Family would like an Interpreter: No

Parent(s)/Guardian

Name: Kevin Bardwell Sr.

Role: Parent

Address: 1217 Madison Avenue Norfolk, NE 68701

Home phone:

Work phone:

Name: Antoinette Brandy

Role: Parent

Address: 1217 Madison Avenue Norfolk, NE 68701

Home phone: 402-640-8206

Work phone:

Services Coordinator / Case Manager Information

Name: Margaret A. Jensen

Address: 1405 Riverside Blvd., PO Box 293, Norfolk, NE 68702-0293

Phone: 402-371-7284

Agency: Northeast Nebraska Community
Action Partnership / NENCAP

IFSP Meeting Dates

Type	Date	Date Sent
Periodic	2015-02-05	2015-02-12

IFSP Previous Meeting Dates

Type	Date	Date Sent
No previous meeting dates found.		

Date	Family Concerns
	<p>Priority: Find out more about Kevin's hearing. Check out options for resources if he has a hearing loss.</p> <p>Update: Kevin was seen at Boys Town on August 22. The tests indicated that left ear finding suggests normal high frequency hearing sensitivity and mid low-to-mid frequency hearing loss. Right ear findings suggest normal to near normal hearing sensitivity. Boys Town recommended that he be followed by EDN due to significant delays in speech and language development. They also recommended that hearing sensitivity and middle ear status be monitored and his hearing be followed closely.</p> <p>The results of the hearing test was shared with NPS teachers of deaf and hard of hearing.</p> <p>Plan: His hearing will be monitored by Melissa Jantz.</p> <p>Priority: Figure out ways to keep Kevin occupied so he is not preoccupied with eating cotton.</p> <p>Update: Kevin still picks at the furniture and eats the stuffing once in awhile but not as much as before. He eats crayons, pencil eraser, his sister's lip gloss. He finds the tiniest little things on the floor and puts them in his mouth.</p> <p>Plan: Continue to find ways to keep him occupied and not putting things in his mouth.</p> <p>Priority: Explore activities that will help Kevin talk more and interact more with his family. Focus on activities that will help Kevin communicate what he wants and needs.</p> <p>Update: Kevin communicates his wants and needs in a variety of ways. He pushes his parents to the kitchen when he wants something. He cries if they leave the kitchen and haven't given him what he wants. He drops to the floor when he doesn't want to go where you are taking him. He stares at what he wants. He makes a different sound for wanting a drink or something to eat. He is beginning to reach for what he wants when offered a choice of two snacks.</p> <p>Plan: Continue to focus on ways to help Kevin communicate what he wants and needs.</p>
Feb 5, 2015	<p>Priority: Review options for resources that will help the family.</p> <p>Driver's License: Kevin has contacted sources in Chicago. He needs to reopen his case there. He is working on that.</p> <p>Landlord: The landlord tenant handbook was shared with the family. They would prefer to stay in their current home since it is large enough to meet their needs.</p> <p>Kevin's vision: Information about the Vision USA program was shared. Kevin contacted them and is in the process of providing the income verification needed.</p> <p>Legal issues: Kevin will just have a fine.</p> <p>SSI-DCP: Kevin Jr. is eligible for SSI and the SSI-DCP program. He and his sister, Janiah, receive respite care funding through the SSI-DCP program. Antoinette is familiar with Jeanette Hastings, SSI-DCP Case Worker, and how the SSI-DCP program works.</p> <p>Plan: Continue to review needs and options for resources.</p> <p>Kevin may have surgery on the second toe on his right foot. He will see a bone specialist at the burn clinic in Lincoln next week. The specialist will determine what will be done.</p> <p>Plan: Antoinette will keep the team informed about the plan.</p> <p>Antoinette is wondering about potty training for Kevin.</p> <p>Plan: Explore strategies when Antoinette is ready to start potty training.</p>

Previous IFSPs

Date	Previous IFSP Text:

2014-08-21

Antoinette and Kevin Sr. noticed that, like his sister, Janiah, Kevin Jr. was not responding to his name and sounds in home. They are concerned about his hearing. Kevin does not like having his ears touched so a hearing test at Norfolk ENT was not successful. He will be sedated for a hearing test at Boys Town west campus on August 22nd.
Priority: Find out more about Kevin's hearing. Check out options for resources if he has a hearing loss.

Kevin Sr. and Antoinette shared that Kevin eats non-food items. They have to monitor him closely or he will pick at the mattress or couch until he makes a hole. He eats the stuffing.
Priority: Figure out ways to keep Kevin occupied so he is not preoccupied with eating cotton.

Antoinette and Kevin are concerned that Kevin is not talking. They don't know when he is hungry because he never asks for food. They keep food available for him around the house so he can find it when he is hungry. They notice that he is in his own little world and doesn't interact with his brother, Kevvon. Kevin Sr. shared that Kevin doesn't respond back and forth with them, e.g., repeating words, making sounds. They would like Kevin to interact more with them and his siblings.
Priority: Explore activities that will help Kevin talk more and interact more with his family. Focus on activities that will help Kevin communicate what he wants and needs.

Kevin prefers being at home. He does not like going outside. He cries the whole time when they go to the park. When the older children are home and can watch him, they leave him at home while the family goes to the park.

Kevin would like to know more about options for resources.
-His driver's license was suspended in Chicago. He would really like to get his driver's license so he wouldn't have to walk to work and be able to take advantage of more employment opportunities.
-He wonders about what their landlord is required to do around the house and what they are required to do. He likes the house they are living in because it is big enough for their family.
-Kevin is concerned about his vision. He'd like to see better.
Priority: Review options for resources that will help the family.

Date	Child Strengths
Feb 5, 2015	<p>2-5-15</p> <p>Baby KaAliyah joined the family on January 7th. She is a good baby. Antoinette returned to work at McDonald's on February 3rd following maternity leave. Kevin is showing more interest in his toys now. He loves his blocks. He loves bath time and notices every opportunity to climb in the tub. He is persistent when communicating what he wants. He communicates what he wants and doesn't want in a variety of ways, e.g., covers his ears, drops to the floor, stares at what he wants, pats your legs. He notices Melissa's bag when she arrives for a home visit now. He is interested in what's in the bag. He is interacting more with KJ now. He notices what KJ is doing and is beginning to imitate what he is doing. He is doing some activities on his own now instead of wanting you to do it, e.g. writing with the pen. Kevin Sr. and Antoinette are focusing on specific activities, e.g., calling his name, making eye contact when offering choices, giving his choices. Kevin's siblings are aware of his needs.,e.g., everyone is aware that loud noises are hard for Kevin. Kevin and Antoinette notice the difference in how Kevin is making some sounds and that each way means something different, e.g., drink or hunger.</p>

Previous IFSPs

Date	Previous IFSP Text:
2014-08-21	<p>Kevin:</p> <p>He no longer has to go to medical physical therapy for his feet.</p> <p>He finger feeds himself. He finds his sippy cup and food that his parents make available to him during the day.</p> <p>He stops what he is doing when Antoinette says, "Aa Aa Aa" or Kevin Sr. thumps his fingers.</p> <p>He loves bath time.</p> <p>His gross and fine motor skills are appropriate for his age.</p> <p>He has a good memory.</p> <p>He figures out ways to get what he wants.</p> <p>Family:</p> <p>Kevin Sr. and Antoinette both want to know what they can do to help Kevin.</p> <p>Antoinette shared that she is relieved to know that Kevin qualifies for services because she saw how services helped Janiah.</p> <p>Kevin and Antoinette's work schedules allow one of them to be home with the children. Asra Stewart cares for the little boys when needed.</p> <p>Kevin's siblings help monitor what he is doing and alert the parents when he is getting into things.</p> <p>Antoinette's cousins watch Kevin when they can so he can stay home when the family goes to the park.</p> <p>The family has a daily routine that works for them. The children know the routine.</p> <p>Kevin Sr. and Antoinette work together and know what they want to do.</p> <p>Kevin has a dream of working for himself and starting his own business.</p>

Periodic IFSP - Child's Present Levels of Development

Date	Vision
Feb 5, 2015	Vision is not a concern at this time. Kevin can still spot the tiniest thing on the floor even when no one else sees it. He likes to watch the Baby First Channel.

Previous IFSPs

Date	Previous IFSP Text:
2014-08-21	Vision is not a concern at this time. Kevin sees the tiniest little things, e.g., crumbs.

Date	Hearing
Feb 5, 2015	Kevin covers his ears with his hands when noises are too loud, e.g., yelling or speaking loudly. When a noise is too loud, he covers his ears, runs and screams. If Kevin is in the living room and he hears the Baby First Channel's music in the bedroom, he runs to the bedroom. He responds when he hears Antoinette say "Pat-a-Cake" and "Peek-a-Boo." When he hears the water running, he knows it is bath time.

Previous IFSPs

Date	Previous IFSP Text:
2014-08-21	Kevin passed the newborn hearing screening. There are concerns about his hearing due to a sibling with hearing loss. His parents notice that he does not respond to sounds in his home. He does not come when called. A hearing test was attempted at Norfolk ENT on August 4th. That was not successful because Kevin does not like having his ears touched. A sedated ABR is scheduled on August 22nd on west campus of Boys Town National Research Hospital. Kevin Sr. shared that some days Kevin will do exactly what he says but he doesn't know if Kevin Jr. understands.

Date	Health Status
Feb 5, 2015	<p>Dr. Pierce continues to monitor Kevin's health. He weighs 23 pounds. He is current on his immunizations. He participates in the WIC program.</p> <p>He doesn't wear the compression socks any more. His skin looks excellent and is smooth.</p> <p>Kevin may have surgery on the second toe on the right foot. He is scheduled to see a bone specialist at the clinic in Lincoln next week. The condition of the toe is throwing off his balance. Antoinette shared that the "bone is off track". Medical physical therapy was initiated to address the issue but stopped when it wasn't helping the issue.</p>

Previous IFSPs

Date	Previous IFSP Text:
2014-08-21	<p>Dr. Erin Pierce monitors Kevin's health locally. He is current on his immunizations. He participates in the WIC program.</p> <p>Antoinette estimated that he weighs about 24 pounds.</p> <p>Kevin was severely burned on his feet in February 2014. He's had two surgeries on his feet. Skin from his thigh was grafted to his feet. Antoinette puts lotion on his feet. He wears special socks on both feet all the time.</p>

Date	Cognitive / Thinking Skills
Feb 5, 2015	<p>Kevin pulls out the kitchen drawers so he can climb up to get what's on the counter.</p> <p>He is more observant of what is happening around him now, e.g., watched KJ drop things through the handle of the push toy and then did it himself; watched where his sister was getting the pencils and got into them himself.</p> <p>Kevin is starting to imitate more. He imitates his siblings when he sees them dancing to the Just Dance video, e.g., he turns around in circles.</p> <p>Kevin remembers how you use your hands to erase things on the phone so he takes your hand and wants you to erase things on paper.</p> <p>He is more interested in his toys now. He sits down and tries to figure them out. Antoinette shared that he was always given a truck in a box at the specialist's office in Lincoln. In the past he didn't pay attention to it. At his last visit, he pushed the truck around.</p> <p>He loves phones and knows that he has to swipe the screen.</p> <p>He is working on making eye contact when given the choice between two snacks. He is beginning to reach for what he wants when given two choices. Everyone is working on getting him to point to what he wants.</p> <p>If his parents take his clothes off in the living room, Kevin runs to his bath room because he knows it means that it is bath time.</p> <p>He uses the phone's stylus to color on the phone.</p>

Previous IFSPs

Date	Previous IFSP Text:
2014-08-21	<p>Kevin likes the Baby First Channel.</p> <p>Kevin likes the wagon. He pulls it around and climbs in and out of it.</p> <p>Kevin mostly roams around the house during the day.</p> <p>He hides pieces of cotton so he can get them later.</p> <p>He is observant and has a good memory. He remembers where his parents put things.</p> <p>He pushes something around to stand on to get to things out of reach.</p> <p>He plays little games with his parents, e.g., plays Peek a Boo by pulling a blanket off his head.</p>

Date	Communication Skills
Feb 5, 2015	<p>Kevin cries to get something. If he cries because he wants something he is not supposed to have, e.g., a pencil, he gets over it quickly if the object is out of his view.</p> <p>Kevin Sr. and Antoinette are really working on calling Kevin's name and getting him to respond to it. He responded to his father a couple of times but has not consistently responded when called.</p> <p>Antoinette notices that Kevin says, "ooo ooo" differently for different wants. If he says, "oooo ooo" he wants a drink. If he says it more slowly, he is hungry.</p> <p>He is starting to make more sounds. He makes a low humming sound. He says, "mmmm, aaaaa, ooooo". He makes a whining and squealing sound.</p> <p>If Kevin wants something in the kitchen, he gets mad if you walk out before getting it for him.</p> <p>Kevin drops to the floor when he doesn't want to go where you are taking him.</p> <p>He communicated that he wanted to continue a little game where Antoinette smelled his feet by lifting his foot multiple times.</p> <p>Kevin pats his father's leg when he wants something in the kitchen. If his father doesn't get up immediately, Kevin goes to the kitchen and sits down. He stares at what he wants.</p>

Previous IFSPs

Date	Previous IFSP Text:
2014-08-21	<p>Kevin makes noises but isn't babbling.</p> <p>He laughs at what he sees, e.g., Kevin playing with a balloon.</p> <p>Kevin whines when he can't get what he wants. He cries when he is upset.</p> <p>He stops what he is doing when Antoinette says, "Aa Aa Aa" loudly. He looks at her, cries and walks away. He stops what he is doing when his father thumps his fingers.</p> <p>He touches you to indicate that he wants you to repeat an activity.</p>

Date	Social / Behavior Skills
Feb 5, 2015	<p>Kevin eats the erasers off of pencils. He eats crayons. He puts anything he finds into his mouth. He ate his sister's lip gloss.</p> <p>He doesn't just wander around as much now. He is watching the TV or going to get a toy.</p> <p>He interacts more with KJ now, e.g., KJ started to run with popper toy. When he stopped, Kevin looked for him and laughed. Kevin kept the activity going by looking for KJ and laughing when he stopped.</p> <p>He still doesn't like going out. At the doctor's office, he played with the toys for a little bit and then walked along the wall.</p> <p>Antoinette shared that Kevin's memory is short, e.g., he may be playing with his blocks, want more but forgets that he went into the bedroom to get more blocks. He gets distracted with something else.</p> <p>Kevin occasionally has some repetitive behaviors but they are not as long now.</p> <p>He slides his head on the floor. He bear crawls with his head on the floor. Joint compressions are being tried to help decrease that behavior.</p> <p>Sleeping is going better with the TV turned off. Having the room dark helps him go to sleep. The weighted blanket seems to help Kevin sleep better.</p> <p>If Kevin sleeps until noon, he wants to take a nap at 6:00 pm and then won't go to bed until midnight. Antoinette is working on getting him up earlier in the morning so he naps earlier and goes to bed earlier. She shared that Kevin would sleep a long time if she let him.</p> <p>He snuggles with Antoinette.</p>

Previous IFSPs

Date

Previous IFSP Text:

Kevin prefers to play alone. He puts his cars in his mouth when playing with them. Kevin likes to eat soft non-food items. He will pick at the couch or mattress until he makes a hole and he eats the stuffing. He plays with the cotton in his mouth until it gets soggy before he swallows it if no one is watching him. If his parents see the cotton in his mouth and respond, he swallows it immediately. If he can, he will put cotton in different places so he can get it later. Kevin sleeps with his parents. That makes it easier for them to monitor where he is and what he is doing. Sometimes he moans when he wakes but he usually doesn't say anything when he wakes. Sometimes he watches TV when he wakes and other times he just lays in the bed.

2014-08-21

Bedtime for Kevin and his brother, Kevvon, is 8:00 pm. They watch their favorite TV shows until falling asleep. They are both usually asleep by 9:00 pm. Kevin sleeps through the night. He takes a nap in the afternoon. Some mornings, Kevin will sleep as late as 10:30 or 11:00. The time of nap varies depending on when he wakes in the morning.

Kevin does not like being outside. He prefers to be at home. He cries the whole time when the family goes to the park. He doesn't cry when the family goes swimming but he clings to Antoinette and she knows he doesn't like it.

He calms down when his parents comfort him.

Kevin Sr. shared that little Kevin knows when he's done something wrong because he doesn't whine as much when corrected.

Date	Self-Help / Adaptive Skills
Feb 5, 2015	<p>Kevin does not like wearing shoes and socks. If you can get his shoes on him and get him to walk around in them, he is OK. He hates wearing a coat. If you put a hat on his head, he snatches it right off. He prefers to wear sweats and pajamas. Kevin can take all articles of clothing off quickly.</p> <p>Kevin does not like getting his hair cut.</p> <p>Kevin loves bath time. He climbs into the tub by himself. When his sister left her bath water unattended for just a minute, Kevin climbed into the tub fully clothed. Getting Kevin out of the tub at the end of bath time is a challenge.</p> <p>Kevin likes a limited number of foods. His favorites include yogurt, oatmeal and cereal. He only likes regular Cheerios and Captain Crunch. He will eat a little bit of macaroni. He eats his cereal with milk. Sometimes he tries to use a spoon. Most of time, Antoinette feeds him. He will finger feed himself but he wants to dump the food out.</p> <p>Kevin likes cups with straws. At his brother's basketball game, he eased his way down from his parents so he could get to people's cups. He can drink from a regular cup without assistance. He is learning to not throw the cup when he is done drinking.</p>

Previous IFSPs

Date	Previous IFSP Text:
2014-08-21	<p>Kevin finger feeds himself. He doesn't want anyone to feed him. If given a spoon, he throws it. He sits in a high chair during meal time. Antoinette puts food on his tray until he indicates he is done by throwing the food on the floor. He sits in the high chair until they take him out. If he gets impatient, he tries to climb out of the high chair on his own. Kevin does not ask for food or indicate that he is hungry so his parents make food available to him during the day. If he is hungry and food is available, he will eat it.</p> <p>Kevin can take all articles of clothing off and he can be quick about it. He allows his parents to dress him and he assists by pushing his arms through. He is not yet lifting his legs when they put his pants and shorts on.</p> <p>Kevin likes bath time. He could stay in the bath tub for 20 to 30 minutes splashing and playing with his bath toys.</p>

Date	Fine Motor Skills
Feb 5, 2015	<p>Kevin writes on the wall when he finds a pencil.</p> <p>He likes blocks and can stack a lot of them.</p> <p>Kevin puts his hands on Antoinette's hands when they play Pat-a-Cake.</p> <p>He grabs your hand to get you to help him, e.g., hold the pen.</p> <p>He claps his hands.</p> <p>He holds the phone's stylus with a nice looking tripod grip. He mostly uses his left hand. When he shifted the stylus to the right hand, he used a fist grip.</p>

Previous IFSPs

Date	Previous IFSP Text:
2014-08-21	<p>Kevin's fine motor skills are a strength. They are appropriate for his age.</p> <p>Kevin picks at objects until he makes a hole. He pushes buttons. He turns door knobs. He picks up tiny little crumbs.</p>

Date	Gross Motor Skills
Feb 5, 2015	Kevin turns around in circles until he makes himself dizzy. He likes to swing. He tries to get out the door but isn't able to open the door by himself yet. Antoinette shared that, "He runs like a champ." He walks, runs and climbs. He crawls up and down the stairs on his hands and knees.

Previous IFSPs

Date	Previous IFSP Text:
2014-08-21	Kevin's gross motor skills are a strength. They are appropriate for his age. Kevin walks and runs. He crawls up the steps on his hands and knees. His parents usually carry him down the steps or he bumps down, facing forward, on his bottom. He squats to look at things and stands up without support. He climbs on the bike.

Goal #1**Goal outcome:**

Kevin will participate in play time by communicating his wants. We will know he can do this when he looks at or points to a toy two times during a play activity.

Child / Family strengths and resources related to this goal:

Antoinette and Kevin are open to sharing their questions and needs.

They are willing to try new things to help Kevin progress.

They have experience with special education services and being an advocate for their children.

They have many people in the household that can help with strategies set for Kevin Jr. to meet his goals.

Kevin's Early Development Network providers are knowledgeable about resources and willing to share information and seek out information to help Antoinette and Kevin.

What will be done / by whom:

Kevin Sr. and Antoinette will:

Follow through with recommendations to find activities that will fit into their daily routine.

Assist with scheduling visits and meetings so that services can be provided.

Share their questions and concerns.

Melissa, Early Childhood Special Educator, will:

Monitor and track overall development with Kevin Sr. and Antoinette.

Provide information to parents and providers about activities to promote overall development focusing on activities that will help Kevin begin to communicate.

Demonstrate strategies and activities that the family can implement within their daily routine to benefit Kevin Jr.

Margaret, Services Coordinator will:

Have monthly contact with Kevin Sr. and Antoinette to review questions and needs

Consult with Melissa about services and needs related to helping Kevin Sr. and Antoinette accomplish the IFSP goals set for Kevin Jr..

Coordinate the arrangements for meetings and facilitate communication with Kevin's team.

Progress will be reviewed

6 months

By WhomParents, Early Childhood Special Educator and EDN
Services Coordinator**How Measured**

Parent Report, Observation, and Information Shared

Plan Review for this Goal

02/20/2015

Goal progress:

8-21-14 New Goal

2-5-15 Update:

Kevin Jr. is demonstrating his wants and needs by using grunts and pushing his parents to what he wants. If he wants something to eat or drink he will push his mom or dad into the kitchen. When given two food options, Kevin will reach for the item he wants but is not yet forming a point. In play time, Kevin will reach for a toy that he wants to play with. He will not point to the item and often times does not make eye contact when making a choice. When the item is brought closer to the adult's face, he will make a fleeting glance to the person's face but then quickly return his focus to the item that he wants.

Goal comments:

8-21-14 New Goal

2-5-15 Update:

This goal will be continued with the focus on Kevin Jr. using a purposeful point toward the item that he is choosing while making eye contact with the individual he is communicating with.

Goal #2**Goal outcome:**

Antoinette and Kevin Sr. will have information about resources as they care for Kevin and their family.

Child / Family strengths and resources related to this goal:

Antoinette and Kevin are open to sharing their questions and needs.

They are familiar with the community.

They have experience with special education services and being an advocate for their children.

Kevin's Early Development Network providers are knowledgeable about resources and willing to share information and seek out information to help Antoinette and Kevin.

What will be done / by whom:

Kevin and Antoinette will:

-Share their questions and needs.

-Choose what resources they want to pursue and provide the information needed to access those services.

Margaret and Melissa will:

-Review questions and needs during visits.

-Provide or seek out information regarding the needs that Kevin Sr. and Antoinette share.

-Assist, as needed, to help Antoinette and Kevin to access the services, programs and resources they want to pursue

Progress will be reviewed
in 6 months

By Whom
Parents, Early Childhood Special Educator and EDN
Services Coordinator

How Measured
Information shared and resources identified.

Plan Review for this Goal
02/20/2015

Goal progress:

8-21-14 New Goal.

2-5-15 Update:

Antoinette is very good about sharing information about Kevin. She shares her questions and concerns. Resources are identified as needed. Kevin Jr. is now eligible for SSI. Antoinette is familiar with SSI and the SSI-DCP program because Kevin's sister receives the benefits. Jeanette Hastings, SSI-DCP Case Worker, has been in contact with the family and signed Kevin up for services through SSI-DCP.

The option of participating in the St. Nick program at Christmas time was offered and Antoinette chose to participate. Antoinette shared that the gifts were good and what they requested.

Kevin Sr. was referred for the Vision USA program for assistance with an eye exam and glasses if needed. He is still in the process of

providing the information to document income eligibility.

Information about Planning Region 29 and funding options for training is shared. Information about community events is shared.

Goal comments:

8-21-14 New Goal.

2-5-15 Update:

We will continue to review needs and options for services. We will review the charges that accompany the transition to Part B educational services.

Antoinette and Kevin Sr. will be invited to participate in the 2015 Family Survey. They will be invited to the PRT Annual meeting in April.

Goal #3**Goal outcome:**

Kevin will participate in meal time by responding to his name. We will know he can do this when he looks at a family member who has called his name and touched his arm one time during one meal per day.

Child / Family strengths and resources related to this goal:

Antoinette and Kevin are open to sharing their questions and needs.

They are willing to try new things to help Kevin progress.

They have experience with special education services and being an advocate for their children.

They have many people in the household that can help with strategies set for Kevin Jr. to meet his goals.

Kevin's Early Development Network providers are knowledgeable about resources and willing to share information and seek out information to help Antoinette and Kevin.

What will be done / by whom:

Kevin Sr. and Antoinette will:

Follow through with recommendations to find activities that will fit into their daily routine.

Assist with scheduling visits and meetings so that services can be provided.

Share their questions and concerns.

Melissa, Early Childhood Special Educator, will:

Monitor and track overall development with Kevin Sr. and Antoinette.

Provide information to parents and providers about activities to promote overall development focusing on activities that will help Kevin begin to communicate.

Demonstrate strategies and activities that the family can implement within their daily routine to benefit Kevin Jr.

Margaret, Services Coordinator will:

Have monthly contact with Kevin Sr. and Antoinette to review questions and needs.

Consult with Melissa about services and needs related to helping Kevin Sr. and Antoinette accomplish the IFSP goals set for Kevin Jr..

Coordinate the arrangements for meetings and facilitate communication with Kevin's team.

Progress will be reviewed

6 months

By Whom

Parents, Early Childhood Special Educator, and EDN
Services Coordinator

How Measured

Parent Report, Observation, and Information Shared

Plan Review for this Goal

02/20/2015

Goal progress:

8-21-14 New Goal

2-5-15 Update:

Antoinette has shared that Kevin Jr. has turned to Kevin Sr. calling his name a couple of times but it is not consistent. Antoinette and Kevin Sr. are working on this throughout all daily experiences. Kevin does show occasional response to some of the noises that his mother and father make when he is doing something he is not supposed to do. If they do a loud, "Ah, ah, ah" he will typically stop touching the buttons on the television.

Goal comments:

8-21-14 New Goal

2-5-15 Update:

This goal will be continued. The family will continue to practice and reinforce this skill throughout their daily routines.

Goal #4**Goal outcome:**

Kevin will participate in bath time by imitating. We will know he can do when he copies the actions or sounds he sees and hears his brother Kevvon doing at least two times during a bath.

Child / Family strengths and resources related to this goal:

Antoinette and Kevin are open to sharing their questions and needs.

They are willing to try new things to help Kevin progress.

They have experience with special education services and being an advocate for their children.

They have many people in the household that can help with strategies set for Kevin Jr. to meet his goals.

Kevin's Early Development Network providers are knowledgeable about resources and willing to share information and seek out information to help Antoinette and Kevin.

What will be done / by whom:

Kevin Sr. and Antoinette will:

Follow through with recommendations to find activities that will fit into their daily routine.

Assist with scheduling visits and meetings so that services can be provided.

Share their questions and concerns.

Melissa, Early Childhood Special Educator, will:

Monitor and track overall development with Kevin Sr. and Antoinette.

Provide information to parents and providers about activities to promote overall development focusing on activities that will help Kevin begin to communicate.

Demonstrate strategies and activities that the family can implement within their daily routine to benefit Kevin Jr.

Margaret, Services Coordinator will:

Have monthly contact with Kevin Sr. and Antoinette to review questions and needs.

Consult with Melissa about services and needs related to helping Kevin Sr. and Antoinette accomplish the IFSP goals set for Kevin Jr.

Coordinate the arrangements for meetings and facilitate communication with Kevin's team.

Progress will be reviewed

6 months

By Whom

Parents, Early Childhood Special Educator, and EDN
Services Coordinator

How Measured

Parent Report, Observation, and Information Shared

Plan Review for this Goal

02/20/2015

Goal progress:

8-21-14 New Goal

2-5-15 Update:

During bath time, Kevin Jr. is very focused on playing, splashing, and pouring water. He is not demonstrating imitation skills during this time period but imitation is being noted in other portions of the day. During play time, he will imitate things that his brother KJ is doing. For example, when KJ drops blocks through the handle of a push toy, Kevin will observe for a short period of time and then try the same thing. When his mother does patty cake, he will place his hands on the outside of hers to do the clapping along with her.

Goal comments:

8-21-14 New Goal

2-5-15 Update:

This goal was originally written to highlight bath time because that was one portion of the day that Kevin appeared to enjoy. To broaden this goal, we will focus on expanding Kevin's imitation skills across all parts of his day over the next 6 month period.

Are there special conditions for safe transportation for this child?

Kevin uses a standard car seat.

Services**Service:**

Special Instruction

Setting:

Home

How often?

12 days/6 month period

How much?

60 min/day

Group/Individual

Individual

Natural Environment

Yes

When service Starts and Ends?

Feb 12, 2015 - Aug 5, 2015

Who Pays?

School district

Responsible?

Teacher

The method of delivery for Part C services will be in person services.**Service:**

Services coordination

Setting:

Home

How often?

1 days/month

How much?

15 min/day

Group/Individual

Individual

Natural Environment

Yes

When service Starts and Ends?

Feb 5, 2015 - Aug 5, 2015

Who Pays?

Early Development Network

Responsible?

Services Coordinator

The method of delivery for Part C services will be in person services.

Transition Conference Date:
Feb 5, 2015

Estimated Transition Date:
Aug 31, 2016

Transition Plan

Transition Plan Step 1:

Kevin will be three years old on November 5th, 2015. If he continues to qualify for Early Development Network services at that time, his EDN team will create an appropriate transition plan to Part B educational services. Kevin Sr. and Antoinette will keep the team informed about any changes or transitions that would affect services in the meantime, e.g., moves, changes in contact information, hospitalizations.

Who is responsible?

Kevin's EDN team includes: Parents, Early Childhood
Special Educator, EDN Services Coordinator,

Time Line

02/20/2015

Date Completed

02/05/2015

Transition Plan Step 2:

Baby KaAliyah joined the family on January 7th. 90 days before Kevin's third birthday is August 5th, 2015. Time line and process for transition to Part B educational services was reviewed. Antoinette is interested in preschool for him. Melissa and Antoinette will discuss options for Kevin to practice leaving the house since he is not comfortable doing that. They will review options for him to visit the playground since he likes swinging. Melissa will check out the option of Kevin having some of his visits during summer preschool hours so that he can be exposed to other children and experience the classroom environment. We will finalize his transition plan when we meet for his Annual Review in August. Kevin may have surgery on his foot. Antoinette will keep the team informed about the possibility after she meets with the specialist. Antoinette does not anticipate any other changes or transitions in the next six months.

Who is responsible?

Team

Time Line

08/05/2015

Date Completed

Family Choice: Consent to the continuation of early intervention services or initiation of Special Education services

- I/We have received a copy of the Annual Transition Notice.
- I/We have been informed about the differences between, and the right to choose, early intervention services provided through an IFSP under the Individuals with Disabilities Education Act (IDEA) and the preschool special education services provided through an Individualized Education Program (IEP) under IDEA once my/our child reaches age 3.
- I/We understand that if I/we choose for my/our child to receive special education services through an IEP, my child and family will no longer receive early intervention services nor will receive early intervention services coordination.

- I/We understand that if I/we choose for my/our child to continue to receive early intervention services through an IFSP, at any time I/we may elect to receive special education preschool services instead of early intervention services.
- I/We understand that my/our consent to the continuation of early intervention services is voluntary and that I/we may revoke consent at any time.

☐ Yes ☐ No I/We consent to the continuation of early intervention services for my/our child and family through an IFSP after my/our child's third birthday.

☐ Yes ☐ No I/We request initiation of preschool special education services for my/our child and family at or after age 3.

Parents / Guardian Signature

Parent Signature 1

Date

Parent Signature 1 On File

Parent Signature 2

Date

Parent Signature 2 On File

(If 'No' selected above, please explain)

--

Team Members Present at the Meeting:

Name	Role	Address
Antoinette Brandy	Parent	1217 Madisor Ave. Norfolk, NE 68701 402-640-8206
Name Melissa Jantz	Role Early Childhood Special Educator/District Representative	Address 310 S 3rd St., PO Box 139, Norfolk, NE 68701-0139 402-644-2550
Name Margaret Jensen	Role Service Coordinator	Address 1405 Riverside Blvd., PO Box 293, Norfolk, NE 68702-0293 402-371-7284

Others who are part of the Child/Family Team:

Name	Role	Address
Erin Pierce, M.D.	Pediatrician	301 N 27th St. Suite #1, Norfolk, NE 68701 402-844-8021
Family initial for copy of pages sent A.B.		

Parents / Family Informed Consent

The early intervention services will be provided as described in the IFSP and must begin no later than 30 days from the date of my/our written consent. I/We understand that the IFSP will be reviewed at least every six (6) months.

- I/We understand that a copy of the IFSP, evaluation, child assessment and family assessment will be distributed within 7 calendar days.
- I/We understand that my/our consent is voluntary and that I/we may revoke consent at any time.
- I/We have been informed of the determination(s) of the IFSP team in my/our native language or other mode of communication.
- I/We understand we can accept or decline any service listed in the IFSP without jeopardizing receipt of other services we accept in the plan.

Parents / Guardian Signature

I/We understand the plan and parental rights and give permission to implement this IFSP, and give consent for all services in the IFSP.

Parent Signature 1

Antoinette Brandy

Parent Signature Date 1

2015-02-05

Parent Signature 1

Yes

Parent Signature 2**Parent Signature Date 2****Parent Signature 2**

No

(If 'No' selected above, please explain):

Any Comments:

I/We do not agree with the proposed IFSP as written. However, I/we do consent to the following services/frequency:

Parent Signature 1**Parent Signature Date 1****Parent Signature 1**

No

Parent Signature 2**Parent Signature Date 2****Parent Signature 2**

No



Individual Family Service Plan (Annual)

Student: KEVIN BARDWELL

Date of Birth: Nov 5, 2012

Grade: ECSE

Family Language: English

Date of Consent for Evaluation: 2014-07-17

Additional Language:

Date MDT: 2014-08-21

EDN Referral Date:

Family would like an Interpreter: No

Parent(s)/Guardian

Name: Kevin Bardwell Sr.

Role: Parent

Address: 1217 Madison Avenue Norfolk, NE 68701

Home phone:

Work phone:

Name: Antoinette Brandy

Role: Parent

Address: 1217 Madison Avenue Norfolk, NE 68701

Home phone: 402-640-8206

Work phone:

Services Coordinator / Case Manager Information

Name: Margaret A. Jensen

Address: 140 Riverside Blvd., PO Box 293, Norfolk, NE 68702-0293

Phone: 402-371-7284

Agency: Northeast Nebraska Community
Action Partnership / NENCAP

IFSP Meeting Dates

Type	Date	Date Sent
Annual	2015-08-14	2015-08-21

IFSP Previous Meeting Dates

Type	Date	Date Sent
No previous meeting dates found.		

Date	Family Concerns
Aug 14, 2015	<p>Kevin visited the Little Panther Preschool this summer and Antoinette would like him to continue with preschool there this fall. Plan: Kevin will attend preschool 2 days a week. His teachers will keep his parents informed about how he is doing at preschool. Antoinette will keep his team informed about how he is doing at home.</p> <p>Antoinette shared that she thought Kevin was listening better and doing a lot better on asking for things. She would like to continue to focus on his communication. She hopes that, in the future, they will be able to talk to Kevin, tell him what to do and he will do it. By this time next year, she hopes that Kevin will be talking, responding and be potty trained. Her ultimate goal for Kevin is for him to be as normal as possible.</p> <p>Kevin really likes playing with his blocks but he gets mad when they don't stay together. Then he screams and throws them. He screams when he is in the vehicle and they don't know why he is screaming. Priority: Antoinette shared that she would like Kevin to be able to tell them what he wants to get and what he wants to do. She would like him to be able to tell them what he wants to eat. She would like him to scream less when they are out and about. It would help if Kevin were better with following directions.</p> <p>Kevin will be three years old on November 5th. The process and options for transition to Part B educational services were reviewed. Priority: The team will continue to discuss the option of when to complete the transition, e.g., at the Six Month Review in February or next August. EDN Services Coordination and parents will review the changes that accompany transition.</p>

Previous IFSPs

No Previous IFSPs to display.

Date	Child Strengths
Aug 14, 2015	<p>Antoinette shared that the biggest difference with Kevin is that he plays a lot with the kids and he eats better. Kevin is persistent when he is doing something he enjoys. He is beginning to imitate what he sees his classmates doing. His health has been good.</p> <p>Antoinette and Kevin follow through with suggestions. They share their questions. Everyone in the family helps out with Kevin. Extended family and friends help with transportation and respite.</p>

Previous IFSPs

Date	Previous IFSP Text:
2014-08-21	<p>Kevin:</p> <p>He no longer has to go to medical physical therapy for his feet.</p> <p>He finger feeds himself. He finds his sippy cup and food that his parents make available to him during the day.</p> <p>He stops what he is doing when Antoinette says, "Aa Aa Aa" or Kevin Sr. thumps his fingers.</p> <p>He loves bath time.</p> <p>His gross and fine motor skills are appropriate for his age.</p> <p>He has a good memory.</p> <p>He figures out ways to get what he wants.</p> <p>Family:</p> <p>Kevin Sr. and Antoinette both want to know what they can do to help Kevin.</p> <p>Antoinette shared that she is relieved to know that Kevin qualifies for services because she saw how services helped Janiah.</p> <p>Kevin and Antoinette's work schedules allow one of them to be home with the children. Asha Stewart cares for the little boys when needed.</p> <p>Kevin's siblings help monitor what he is doing and alert their parents when he is getting into things.</p> <p>Antoinette's cousins watch Kevin when they can so he can stay home when the family goes to the park.</p> <p>The family has a daily routine that works for them. The children know the routine.</p> <p>Kevin Sr. and Antoinette work together and know what their son wants to do.</p> <p>Kevin has a dream of working for himself and starting his own business.</p>

Annual IFSP - Child's Present Levels of Development

Date	Vision
Aug 14, 2015	Vision is not a concern at this time. Kevin is still alert of tiny items

Previous IFSPs

No Previous IFSPs to display.

Date	Hearing
Aug 14, 2015	Hearing is not a concern at this time.

Previous IFSPs

No Previous IFSPs to display.

Date	Health Status
Aug 14, 2015	Dr. Pierce continues to monitor Kevin's health. He weighs 25 pounds. He is current on his immunizations. He participates in the WIC program. He had a physical. Blood tests to check lead levels were done. His health has been good. He is not taking any medications

Previous IFSPs

No Previous IFSPs to display.

Date	Cognitive / Thinking Skills
Aug 14, 2015	Kevin watches what other children are doing. He remembers how to do things he has recently learned. He turned square beads around to find the hole. He has good problem solving skills. He likes playing with his cars. Antoinette shared that, even though Kevin doesn't respond to his name, he knows his name. When Kevin is running away from his family, he senses when they are getting close without turning around. When they get close, he stops and smiles.

Previous IFSPs

No Previous IFSPs to display.

Date	Communication Skills
Aug 14, 2015	Kevin makes a few sounds. He will come get his mother and other to help him get what he wants. When he is done eating, he pushes his plate away or gets up and leaves. He will grab your hand to get more. He screams when he is mad.

Previous IFSPs

No Previous IFSPs to display.

Date	Social / Behavior Skills
Aug 14, 2015	Kevin plays by himself most of the time. He likes cars and blocks. He likes puzzles. He sorts items into containers. He stacks blocks by size. He sleeps all night. He will give kisses when requested. Kevin is persistent when he is working on a task.

Previous IFSPs

No Previous IFSPs to display.

Date	Self-Help / Adaptive Skills
Aug 14, 2015	Kevin likes fruit snacks, teddy grahams, popcorn, goldfish and graham crackers. He loves corn dogs. He drinks from a regular cup with no spilling. He doesn't like straws but will use the straw in a juice carton. He helps with dressing by lifting his legs and pushing his arms through. He loves bath time. All the water needs to be drained before he'll get out of the tub.

Previous IFSPs

No Previous IFSPs to display.

Date	Fine Motor Skills
Aug 14, 2015	Kevin likes to stack the Duplo blocks but gets frustrated when they don't stay together. He throws them when he gets mad. He checks the doors to see if he can open them. He loves going outside. He grabs your hand and takes you to what he wants. He plays with blocks. He has a good pincer grasp. He likes to write. He picks up pegs and puts them in the holes. He uses puzzle pieces that have knobs. At preschool, Kevin claps when the other children clap. When listening to the Bear Hunt song, he pats his legs.

Previous IFSPs

No Previous IFSPs to display.

Date	Gross Motor Skills
Aug 14, 2015	Kevin has a riding toy. He just sits on it and hasn't starting pedaling it or moving it with foot power. Kevin is very fast when he is running away from his family.
Previous IFSPs	
No Previous IFSPs to display.	

Goal #1**Goal outcome:**

Kevin will participate in play time by communicating his wants. We will know he can do this when he looks at or points to a toy two times during a play activity.

Child / Family strengths and resources related to this goal:

Antoinette and Kevin are open to sharing their questions and needs.

They are willing to try new things to help Kevin progress.

They have experience with special education services and being an advocate for their children.

They have many people in the household that can help with strategies set for Kevin Jr. to meet his goals.

Kevin's Early Development Network providers are knowledgeable about resources and willing to share information and seek out information to help Antoinette and Kevin.

What will be done / by whom:

Kevin Sr. and Antoinette will:

Follow through with recommendations to find activities that will fit into their daily routine.

Assist with scheduling visits and meetings so that services can be provided.

Share their questions and concerns.

Melissa, Early Childhood Special Educator, will:

Monitor and track overall development with Kevin Sr. and Antoinette.

Provide information to parents and providers about activities to promote overall development focusing on activities that will help Kevin begin to communicate.

Demonstrate strategies and activities that the family can implement within their daily routine to benefit Kevin Jr.

Margaret, Services Coordinator will:

Have monthly contact with Kevin Sr. and Antoinette to review questions and needs.

Consult with Melissa about services and needs related to helping Kevin Sr. and Antoinette accomplish the IFS² goals set for Kevin Jr..

Coordinate the arrangements for meetings and facilitate communication with Kevin's team.

Progress will be reviewed
6 months

By Whom

Parents, Early Childhood Special Educator, and EDN
Services Coordinator

How Measured

Parent Report, Observation, and Information Shared

Plan Review for this Goal
2015-02-20

Goal progress:

8-21-14 New Goal

2-5-15 Update:

Kevin Jr. is demonstrating his wants and needs by using grunts and pushing his parents to what he wants. If he wants something to eat or drink he will push his mom or dad into the kitchen. When given two food options, Kevin will reach for the item he wants but is not yet forming a point. In play time, Kevin will reach for a toy that he wants to play with. He will not point to the item and often times does not make eye contact when making a choice. When the item is brought closer to the adult's face, he will make a fleeting glance to the person's face but then quickly return his focus to the item that he wants.

8-14-15 Kevin communicate what he wants for some activities, e.g., continue with bubbles. His response depends on what you are doing.

Goal comments:

8-21-14 New Goal

2-5-15 Update:

This goal will be continued with the focus on Kevin Jr. using a purposeful point toward the item that he is choosing while making eye contact with the individual he is communicating with.

8-14-15 This goal will be continued. Increase the number of times to 5 times during an activities.

Goal #2**Goal outcome:**

Antoinette and Kevin Sr. will have information about resources as they care for Kevin and their family.

Child / Family strengths and resources related to this goal:

Antoinette and Kevin are open to sharing their questions and needs.

They are familiar with the community.

They have experience with special education services and being an advocate for their children.

Kevin's Early Development Network providers are knowledgeable about resources and willing to share information and seek out information to help Antoinette and Kevin.

What will be done / by whom:

Kevin and Antoinette will:

-Share their questions and needs.

-Choose what resources they want to pursue and provide the information needed to access those services.

Margaret and Melissa will:

-Review questions and needs during visits.

-Provide or seek out information regarding the needs that Kevin Sr. and Antoinette share.

-Assist, as needed, to help Antoinette and Kevin to access the services, programs and resources they want to pursue

Progress will be reviewed
in 6 months

By Whom
Parents, Early Childhood Special Educator and EDN
Services Coordinator

How Measured
Information shared and resources identified.

Plan Review for this Goal
2016-02-12

Goal progress:

8-14-15

Kevin receives SSI and SSI-DCP. Antoinette is familiar with the programs since Kevin's sister is also eligible.

Jeremy Taylor, Kevin's respite care provider, is familiar with the aspects of autism.

Kevin and his siblings participate in the WIC program.

Antoinette participated in the PRT's Annual Meeting. She shares her questions and concerns.

Goal comments:

8-14-15 We will continue to review needs and options for resources.

The time line and process for transition were reviewed. Antoinette was given a copy of the Annual Transition Notice. She is aware of options

for preschool. Kevin participated in the Little Panther preschool this summer. Antoinette would like him to continue with preschool there. We will continue to review the changes that go with the transition from Early Development Network services to Part B services. The option of remaining with EDN Services until August 31, 2016 will be discussed so Antoinette and the team can decide when to complete the transition. Margaret will introduce the new EDN Services Coordinator so she can become familiar with Kevin and the family.

Goal #3**Goal outcome:**

Kevin will participate in meal time by responding to his name. We will know he can do this when he looks at a family member who has called his name and touched his arm one time during one meal per day.

Child / Family strengths and resources related to this goal:

Antoinette and Kevin are open to sharing their questions and needs.

They are willing to try new things to help Kevin progress.

They have experience with special education services and being an advocate for their children.

They have many people in the household that can help with strategies set for Kevin Jr. to meet his goals.

Kevin's Early Development Network providers are knowledgeable about resources and willing to share information and seek out information to help Antoinette and Kevin.

What will be done / by whom:

Kevin Sr. and Antoinette will:

Follow through with recommendations to find activities that will fit into their daily routine.

Assist with scheduling visits and meetings so that services can be provided.

Share their questions and concerns.

Melissa, Early Childhood Special Educator, will:

Monitor and track overall development with Kevin Sr. and Antoinette.

Provide information to parents and providers about activities to promote overall development focusing on activities that will help Kevin begin to communicate.

Demonstrate strategies and activities that the family can implement within their daily routine to benefit Kevin Jr.

Margaret, Services Coordinator will:

Have monthly contact with Kevin Sr. and Antoinette to review questions and needs.

Consult with Melissa about services and needs related to helping Kevin Sr. and Antoinette accomplish the IFSP goals set for Kevin Jr..

Coordinate the arrangements for meetings and facilitate communication with Kevin's team.

Progress will be reviewed

6 months

By Whom

Parents, Early Childhood Special Educator, and EDN
Services Coordinator

How Measured

Parent Report, Observation, and Information Shared

Plan Review for this Goal

2015-02-20

Goal progress:

8-21-14 New Goal

2-5-15 Update:

Antoinette has shared that Kevin Jr. has turned to Kevin Sr. calling his name a couple of times but it is not consistent. Antoinette and Kevin Sr. are working on this throughout all daily experiences. Kevin does show occasional response to some of the noises that his mother and father make when he is doing something he is not supposed to do. If they do a loud, "Ah, ah, ah" he will typically stop touching the buttons on the television.

8-14-15 Kevin does not respond to his name. Antoinette shared that she thinks he knows his name even though he doesn't respond to it.

Goal comments:

8-21-14 New Goal

2-5-15 Update:

This goal will be continued. The family will continue to practice and reinforce this skill throughout their daily routines.

8-14-15 Continue this goal at home and preschool.

Goal #4**Goal outcome:**

Kevin will participate in bath time by imitating. We will know he can do when he copies the actions or sounds he sees and hears his brother Kevvon doing at least two times during a bath.

Child / Family strengths and resources related to this goal:

Antoinette and Kevin are open to sharing their questions and needs.

They are willing to try new things to help Kevin progress.

They have experience with special education services and being an advocate for their children.

They have many people in the household that can help with strategies set for Kevin Jr. to meet his goals.

Kevin's Early Development Network providers are knowledgeable about resources and willing to share information and seek out information to help Antoinette and Kevin.

What will be done / by whom:

Kevin Sr. and Antoinette will:

Follow through with recommendations to find activities that will fit into their daily routine.

Assist with scheduling visits and meetings so that services can be provided.

Share their questions and concerns.

Melissa, Early Childhood Special Educator, will:

Monitor and track overall development with Kevin Sr. and Antoinette.

Provide information to parents and providers about activities to promote overall development focusing on activities that will help Kevin begin to communicate.

Demonstrate strategies and activities that the family can implement within their daily routine to benefit Kevin Jr.

Margaret, Services Coordinator will:

Have monthly contact with Kevin Sr. and Antoinette to review questions and needs.

Consult with Melissa about services and needs related to helping Kevin Sr. and Antoinette accomplish the IFSP goals set for Kevin Jr.

Coordinate the arrangements for meetings and facilitate communication with Kevin's team.

Progress will be reviewed

6 months

By Whom

Parents, Early Childhood Special Educator, and EDN Services Coordinator

How Measured

Parent Report, Observation, and Information Shared

Plan Review for this Goal

2015-02-20

Goal progress:

8-21-14 New Goal

2-5-15 Update:

During bath time, Kevin Jr. is very focused on playing, splashing, and pouring water. He is not demonstrating imitation skills during this time period but imitation is being noted in other portions of the day. During play time, he will imitate things that his brother KJ is doing. For example, when KJ drops blocks through the handle of a push toy, Kevin will observe for a short period of time and then try the same thing.

When his mother does patty cake, he will place his hands on the outside of hers to do the clapping along with her.

8-14-15 Kevin is not imitating sounds or activities at home. He imitates activities at preschool, e.g., clapping his hands and patting his legs.

Goal comments:

8-21-14 New Goal

2-5-15 Update:

This goal was originally written to highlight bath time because that was one portion of the day that Kevin appeared to enjoy. To broaden this goal, we will focus on expanding Kevin's imitation skills across all parts of his day over the next 6 month period.

8-14-15 Continue the goal at home and preschool. Imitation skills at preschool may include concepts of numeracy and preliteracy during the daily routine at preschool. Activities may include matching letters and numbers, counting, concepts of more, some and few. Other activities may include imitating and repeating the alphabet, e.g., ABC song. Focus will be increasing vocabulary which may include vocaling and sign language.

Goal #5**Goal outcome:**

Kevin will participate in family outings by listening and communicating his needs. We will know he can do this when he follows directions, screams less, and lets people know what he wants by pointing, vocalizing or using sign language at least three times a day.

Child / Family strengths and resources related to this goal:

Antoinette and Kevin are motivated for Kevin to learn to listen to them and do what they tell him to do.

Everyone in the home helps keep track of Kevin.

Kevin is learning new skills at preschool.

Antoinette shared that she thought Kevin was listening better and doing a lot better on asking for things.

What will be done / by whom:

Antoinette and Kevin will:

- Share information about Kevin and how he is doing at home and on family outings
- Make sure he gets to preschool.

Kevin's teachers will:

- Share information about Kevin and how he is doing at school.
- Share information about strategies that work at school so his family can try them at home.

EDN Services Coordination will:

- Have monthly contact with Kevin's parents to review progress, services and needs
- Facilitate communication with his team members.
- Review the transition process.

Progress will be reviewed

In 6 months

By Whom

Team

How Measured

Parent and teacher report, Observation

Plan Review for this Goal

2016-02-12

Goal progress:

8-14-15 New goal.

Goal comments:

8-14-15 New goal.

Are there special conditions for safe transportation for this child?

Kevin uses a standard car seat.

Services**Service:**

Services coordination

Setting:

Home

How often?

1 days/month

How much?

15 min/day

Group/Individual

Individual

Natural Environment

Yes

When service Starts and Ends?

Aug 14, 2015 - Feb 12, 2016

Who Pays?

Early Development Network

Responsible?

Services Coordinator

The method of delivery for Part C services will be in person services.**Service:**

Special Instruction

Setting:

Community

How often?

2 days/week

How much?

200 min/day

Group/Individual

Group

Natural Environment

Yes

When service Starts and Ends?

Aug 20, 2015 - Feb 12, 2016

Who Pays?

School district

Responsible?

Teacher

The method of delivery for Part C services will be in person services.**Other Services****Service:**

WIC

Start Date:

Nov 15, 2012

End Date:

Nov 5, 2017

Person Responsible:

Parent and WIC Staff

Funding Source:

USDA

Transition Conference Date:

Aug 14, 2015

Estimated Transition Date:

Aug 31, 2016

Transition Plan**Transition Plan Step 1:**

Kevin will be three years old on November 5th, 2015. If he continues to qualify for Early Development Network services at that time, his EDN team will create an appropriate transition plan to Part B educational services. Kevin Sr. and Antoinette will keep the team informed about any changes or transitions that would affect services in the meantime, e.g., moves, changes in contact information, hospitalizations.

Who is responsible?

Kevin's EDN team includes: Parents, Early Childhood
Special Educator, EDN Services Coordinator,

Time Line

02/20/2015

Date Completed

2015-02-05

Transition Plan Step 2:

Baby KaAliyah joined the family on January 7th. 90 days before Kevin's third birthday is August 5th, 2015. Time line and process for transition to Part B educational services was reviewed. Antoinette is interested in preschool for him. Melissa and Antoinette will discuss options for Kevin to practice leaving the house since he is not comfortable doing that. They will review options for him to visit the playground since he likes swinging. Melissa will check out the option of Kevin having some of his visits during summer preschool hours so that he can be exposed to other children and experience the classroom environment. We will finalize his transition plan when we meet for his Annual Review in August. Kevin may have surgery on his foot. Antoinette will keep the team informed about the possibility after she meets with the specialist. Antoinette does not anticipate any other changes or transitions in the next six months.

Who is responsible?

Team

Time Line

08/05/2015

Date Completed

Transition Plan Step 3:

Kevin had visits in the classroom and participated in summer preschool. The options for completing the transition from Part C Early Development Network services to Part B educational services were reviewed. Antoinette would like Kevin to continue EDN services and attend preschool at the Little Panther Preschool. Norfolk Public Schools is aware of that choice.

Kevin will attend preschool 2 days a week starting on August 20th. Transportation to and from school will be provided by the school district.

Kevin's team will continue to review the option of when to complete the transition e.g., at the Six Month Review in February or at the Annual Review in August.

EDN Services Coordination and Parents will continue to review the changes that will accompany the transition, e.g., home-based to preschool, end of Services Coordination, IFSP vs. IEP.

A copy of the Annual Transition Notice was given to parents.

Who is responsible?

Team

Time Line

02/12/2016

Date Completed

Family Choice: Consent to the continuation of early intervention services or Initiation of Special Education services

- I/We have received a copy of the Annual Transition Notice.
- I/We have been informed about the differences between, and the right to choose, early intervention services provided through an IFSP under the Individuals with Disabilities Education Act (IDEA) and the preschool special education services provided through an Individualized Education Program (IEP) under IDEA once my/our child reaches age 3.
- I/We understand that if I/we choose for my/our child to receive special education services through an IEP, my child and family will no longer receive early intervention services nor will receive early intervention services coordination.
- I/We understand that if I/we choose for my/our child to continue to receive early intervention services through an IFSP, at any time I/we may elect to receive special education preschool services instead of early intervention services.
- I/We understand that my/our consent to the continuation of early intervention services is voluntary and that I/we may revoke consent at any time.

☐ Yes ☐ No I/We consent to the continuation of early intervention services for my/our child and family through an IFSP after my/our child's third birthday.

☐ Yes ☐ No I/We request initiation of preschool special education services for my/our child and family at or after age 3.

Parents / Guardian Signature**Parent Signature 1****Date****Parent Signature 1 On File****Parent Signature 2****Date****Parent Signature 2 On File**

(If 'No' selected above, please explain)

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Team Members Present at the Meeting:

Name	Role	Address
Antoinette Brandy	Parent	1217 Madison Ave. Norfolk, NE 68701 402-640-8206
Name	Role	Address
Monica Pickinpaugh	Early Childhood Special Educator/District Representative	310 S 3rd St., PO Box 139, Norfolk, NE 68702-0139 402-644-2550
Name	Role	Address
Margaret Jensen	Service Coordinator	1405 Riverside Blvd., PO Box 293, Norfolk, NE 68702-0293 402-371-7284

Others who are part of the Child/Family Team:

Name	Role	Address
Erin Pierce, M.D.	Pediatrician	301 N 27th St. Suite #1, Norfolk, NE 68701 402-844-8021
Family initial for copy of pages sent A.B.		
Name	Role	Address
Jeanette Hastings	SSI-DCP Case Worker	209 N 5th St., Norfolk, NE 68701 402-370-3131
Family initial for copy of pages sent A.B.		

Parents / Family Informed Consent

The early intervention services will be provided as described in the IFSP and must begin no later than 30 days from the date of my/our written consent. I/We understand that the IFSP will be reviewed at least every six (6) months.

- I/We understand that a copy of the IFSP, evaluation, child assessment and family assessment will be distributed within 7 calendar days.
- I/We understand that my/our consent is voluntary and that I/we may revoke consent at any time.
- I/We have been informed of the determination(s) of the IFSP team in my/our native language or other mode of communication.
- I/We understand we can accept or decline any service listed in the IFSP without jeopardizing receipt of other services we accept in the plan.

Parents / Guardian Signature

I/We understand the plan and parental rights and give permission to implement this IFSP, and give consent for all services in the IFSP.

Parent Signature 1

Antoinette Brandy

Parent Signature Date 1

2015-08-14

Parent Signature 1

Yes

Parent Signature 2**Parent Signature Date 2****Parent Signature 2**

No

(If 'No' selected above, please explain):

Any Comments:

I/We do not agree with the proposed IFSP as written. However, I/we do consent to the following services/frequency:

Parent Signature 1**Parent Signature Date 1****Parent Signature 1**

No

Parent Signature 2**Parent Signature Date 2****Parent Signature 2**

No



Multidisciplinary Evaluation Team MDT Report

Student: KEVIN BARDWELL

Date of Birth: Nov 5, 2012

Grade: EI 0-2

School: Early Childhood Center

School District: Norfolk Public Schools

Parents: Kevin Bardwell Sr., Antoinette Brandy

Date MDT: 08/21/2014

Date Notice: 08/19/2014

The evaluations consisted of procedures that were used to determine whether the child has a disability and the nature and the extent of the special education and related services that will be provided, if the child qualifies.

Check all that apply to this MDT Report

Initial verification: No

~~Initial verification: Yes, 08/21/2014~~

☒ The testing materials and procedures selected and administered were not racially or culturally discriminatory.

Check either A or B

- ☒ The MDT evaluation was completed in the language and form most likely to yield accurate information on what the child knows and can do academically, developmentally and functionally.
- ☐ It was not feasible to complete the MDT evaluation in the child's predominant or native language or other mode of communication.

Explanation:

☒ Materials and procedures used to assess a child with limited English proficiency were selected and administered to insure that they measure the extent to which the child has a disability and needs special education, rather than measuring the child's English language skills.

☒ A variety of assessment tools and strategies are used to gather relevant functional, developmental and academic information about the child, including information provided by the parent, and information related to enabling the child to be involved in and progress in the general education curriculum (or for a preschool child, to participate in appropriate activities), that may assist in determining whether the child is a child with a disability according to 92 NAC 51 (Rule 51), and the content of the child's IEP or IFSP.

☒ All data information obtained from the parent was considered for the purpose of making the verification decision.

Summary of data obtained:

Data from the parent is documented in initial referral contact with Service Coordinator, and on the RBI. Parents are concerned that Kevin may have a hearing loss since he is not talking.

☒ Instruments used to complete the MDT evaluation have been validated for the specific purpose for which they were used.

☒ The assessments are administered by trained and knowledgeable personnel in accordance with any instructions provided by the producer of the assessments.

If the assessment was not conducted under standard conditions, state the description of the extent to which the assessment varied from standard conditions.

☒ Assessments and other evaluation materials were used for purposes for which the assessments or measures are valid and reliable.

☒ Tests and other evaluation materials included those tailored to assess specific areas of educational need and not merely those that are designed to provide a single general intelligence quotient.

☒ Tests were selected and administered so as best to insure that if a test is administered to a child with impaired sensory, manual, or speaking skills, the test results accurately reflect the child's aptitude or achievement level or whatever other factors the test purports to measure, rather than reflecting the child's impaired sensory, manual, or speaking skills (unless those skills are the factors that the test purports to measure).

☒ No single measure or assessment was used as the sole criterion for determining whether a child is a child with a disability and for determining an appropriate educational program for the child.

☒ The child was assessed in all areas related to the suspected disability, including if appropriate, health, vision, hearing, social and emotional status, general intelligence, academic performance, communicative status, and motor abilities.

☒ The evaluation was sufficiently comprehensive to identify all of the child's special education and related services needs, whether or not commonly linked to the disability category in which the child has been classified.

☒ The team used technically sound instruments to assess the relative contribution of cognitive and behavioral factors in addition to physical or development factors.

☒ The team used assessment tools and strategies that provide relevant information that directly assists persons in determining the educational needs of the child.

☒ Drew upon information from a variety of sources, including aptitude and achievement tests, parent input, teacher recommendations, physical condition, social or cultural background, and adaptive behavior;

☒ The information obtained from all of these sources was documented and carefully considered.

☒ In making a determination of eligibility, a child shall not be determined to be a child with a disability if the determining factor is lack of appropriate instruction in reading, lack of instruction in math, or limited English proficiency.

Check the appropriate line to indicate the verification decision

☐ A. No disability verified.

If no disability is verified refer student to SAT (Student Assistance Team) or problem-solving team and provide MDT information to SAT.

Date Referred to SAT:

SAT Contact Person:

☒ B. The child has met the written verification requirements as per one or more of the following:

- | | |
|---|---|
| Autism (AU) <input type="checkbox"/> | Speech Language Impairment (SLI) in the area: |
| Emotional Disturbance (ED) <input type="checkbox"/> | Language <input type="checkbox"/> |
| Deaf Blindness (DB) <input type="checkbox"/> | Articulation <input type="checkbox"/> |
| Hearing Impairment (HI) <input type="checkbox"/> | Voice <input type="checkbox"/> |
| Hearing Disability | Fluency <input type="checkbox"/> |
| Deaf (Severe Profound) <input type="checkbox"/> | Traumatic Brain Injury (TBI) <input type="checkbox"/> |
| Hard of Hearing (Mild/Moderate) <input type="checkbox"/> | Visual Impairment (VI) in the area of: <input type="checkbox"/> |
| Intellectual disability <input type="checkbox"/> | Visual Impairment |
| Multiple Impairments (MULTI) <input type="checkbox"/> | Blind <input type="checkbox"/> |
| Orthopedic Impairment (OI) <input type="checkbox"/> | Legally Blind <input type="checkbox"/> |
| Other Health Impairment (OHI) <input type="checkbox"/> | Partially Sighted <input type="checkbox"/> |
| Specific Learning Disability (SLD) <input type="checkbox"/> | Developmental Delay (DD) <input checked="" type="checkbox"/> |

Primary Disability: Developmental Delay (DD)

Basis for making the determination:

Kevin qualifies for early intervention services in the area of developmental delay as per the Nebraska Department of Education Rule 52. This rule states that a child shall have a significant delay as measured by appropriate diagnostic instruments and procedures in one or more of the following areas and, by reason thereof needs special education and related services: cognitive development; physical development; communicative development; social/emotional development; adaptive behavior or skills development, or a diagnosed physical or mental condition that has a high probability of resulting in a substantial delay in function in one or more of such areas.

The following assessments were used and support this verification decision:

Kevin was referred to Early Development Network by Dr. Erin Pierce. Concerns noted at the time were that Kevin was not responding to his name, he was not talking very much, and his overall development seemed delayed.

Kevin is not currently meeting age level expectations in the areas of cognitive development, adaptive behavior, and social-emotional development. The family presented concerns to the team that Kevin had a significant hearing loss. A sedated Auditory Brain Response hearing evaluation was completed at

Boystown National Research Hospital on August 22, 2014 and it was determined that Kevin demonstrated a unilateral mild loss in his left ear. See attached report.

At the time of evaluation, Kevin did not interact with the people within his home environment or the evaluators. As his parents described it, he appears to "be in his own world". Kevin appeared to be unaware of new people entering his home, did not play with any toys or his brother, and was not startled when a balloon popped very suddenly. Kevin spends a great deal of time during his day poking holes into the couch cushions and mattresses in order to dig out stuffing that he then places in his mouth. Kevin's parents say that he will mouth the stuffing until an adult realizes what he has done and then he will quickly swallow it to avoid having the stuffing removed from his mouth. Kevin's father explained that they have to constantly watch him in order to attempt to control this behavior. It was stated that Kevin will even hide the stuffing in various places in the home in order to retrieve it at a later time. He does not try to communicate with his family or try to make his needs known. He will not point at people or things or pull on his family to get their attention. He makes no attempt to let them know he is hungry or thirsty but will eat food/drink they leave out for him. He rarely displays very brief eye contact and he does not play with toys, but will 'mouth' them or other objects at times.

Developmental Assessment of Young Children:

Communication Subtest: (mean=100, SD=15)

Receptive Language SS=<50 (significantly below average).

Kevin demonstrates a normal breathing pattern, will smile occasionally at family and will briefly stop an activity when his mom loudly says "Eh Eh Eh." He does not follow simple commands; shake his head yes or no; move to music; turn toward a loud noise or respond with appropriate gestures for 'up' or 'bye bye.'

Expressive Language SS=57 (significantly below average range). Kevin makes a few noises such as /m/; he has different cries for different needs; produces vowel sounds and will laugh out loud when tickled. He does not produce strings of different sounds such as /mama/; he does not use any words and makes no attempt to communicate with his family or others.

Total Language SS=53 (significantly below average range).

Cognitive Subtest: (mean=100,SD=15) SS= 82 (Borderline Range)

Kevin is currently able to transfer objects from one hand to another; retrieve an object that is hidden; roll wheeled toys; and demonstrate appropriate use of everyday items such as a cup. Items that Kevin is not yet completing include looking at pictures in a book; handing an object to a person to have a desired action repeated; imitating scribbling; combining two related objects during play such as a bowl and a spoon; and managing multiple toys by setting one aside when given a new toy.

Physical Development Subtest:

Gross Motor (mean=100, SD=15) SS= 91 (Average Range)

Kevin is demonstrating many age appropriate skills within this area. He is able to squat during play; stoop down to pick something up and then stand again; climb on low play equipment; and walk up and down stairs with the support of a rail or wall. He is not yet throwing a ball overhand; running without falling; or walking up stairs by alternating feet.

Fine Motor (mean=100, SD=15) SS=82 (Borderline Range)

In this area, Kevin is able to pick up small objects using his thumb and forefinger; poke with his index finger; and hold an object between fingers and opposed thumb and palm of hand. Kevin is not yet turning thick pages in a book; scribbling spontaneously; holding a crayon; or using one hand consistently in most activities.

Adaptive Behavior Subtest: (mean=100, SD=15) SS=78 (Below Average Range)

Kevin is able to feed himself finger foods; chew textured foods; cooperate in dressing routines; and sleep through the night. Areas that need further development include drinking from an open glass held by an adult (not a sippy cup); sipping liquids using a straw; helping with simple household tasks such as putting things away; and fussing or communicating when his diaper needs to be changed.

Social-Emotional Subtest: (mean=100, SD=15) SS=54 (Significantly Below Average Range)

Kevin is demonstrating skills far below his age level expectation within this developmental area. Items that he can currently demonstrate include relaxes his body when held; stops crying when talked to or picked up; smiles reflexively; recognizes familiar faces and objects by waving arms and legs; comforts self; and laughs when head is covered with a cloth. Kevin does not establish eye contact for at least a few seconds; look at adult faces for several seconds; interact by smiling and cooing; know the difference between caregivers and strangers; studies at the national level to the extent that he is able to do so; and is called by looking at the person and vocalizing.

Receptive-Expressive Emergent Language Test-Third Edition: (mean=100,SD=15)

Receptive Language SS=<55 (significantly below average range). Kevin does not respond to unexpected sounds or respond to any sounds; he is not quieted by your voice or look at someone when they are talking to him.

Expressive Language SS=<55 (significantly below average range). Kevin will cry loudly and makes a few vocalic or consonant sounds; he has different cries for different needs; he makes some happy sounds. He does not imitate sounds he hears you make to him; he does not vary the pitch of his sounds or laugh unless tickled.

Describe the child's education needs and the nature and extent of the special education related services that the child needs; for infants and toddlers, describe the developmental needs in each of the developmental domains and the unique needs of the child in each of the developmental areas.

Educational needs:

1. Cognitive Development:

This is an area of concern as Kevin is currently scoring below average. It remains difficult to properly assess Kevin's cognitive abilities as it is a struggle to gain his attention.

2. Physical Development:

This area will continue to be monitored. Currently, Kevin's Gross Motor Skills are an area of strength within the average range. His fine motor skills are scoring in the borderline range.

3. Communication Development:

This is an area of concern as Kevin is currently scoring significantly below average. He is not currently producing any purposeful communication attempts with his family members.

4. Social/Emotional Development:

This is an area of concern as Kevin is currently scoring significantly below average. He is not currently demonstrating eye contact or a social awareness of others around him.

5. Adaptive Development:

This is an area of concern as Kevin is currently scoring well below average. He is not demonstrating age appropriate adaptive skills.

Listing of required Team Members

#	Name	Position on MDT	"I agree with the MDT decision"
1	Kevin Bardwell Sr.	Father	Yes
2	Julie Mueller	MA, CCC-SLP/District Representative	Yes
3	Melissa Jantz	Early Childhood Special Educator	Yes

For students attending non-public schools, an administrator or a designated representative of the non-public school shall be a member of the MDT.

* Should a member(s) of the MDT not agree with the conclusion(s) of the report, they must submit a separate statement (minority report) presenting his or her conclusion(s).

The parent was provided a copy of the multidisciplinary evaluation team report on: 08/28/2014 by: Melissa Jantz

MDT has been provided at no cost



Individual Education Program (IEP)

Student: KEVIN BARDWELL

Date of Birth: Nov 5, 2012

Grade: ECSE

School: Early Childhood Center

School District: Norfolk Public Schools

Parents: Kevin Bardwell Sr., Antoinette Brandy

In Effect: Feb 11, 2016 to Feb 10, 2017

The Following Participants Were In Attendance At The IEP Meeting

Conference Date: Feb 11, 2016

Participant Name(s)	In Attendance?	Position/Relationship To Student	Date
Antionette Brandy	Yes	Parent	Feb 11, 2016
		Student (when ever appropriate, or if the student is 16 years of age or older)	____/____/____
Monica Pickinpaugh	Yes	Regular education teacher	Feb 11, 2016
Monica Pickinpaugh	Yes	Special education teacher or provider	Feb 11, 2016
Melissa Jantz	Yes	School district representative	Feb 11, 2016
Monica Pickinpaugh	Yes	Individual to interpret evaluation results	Feb 11, 2016

Parent Signature

- ☒ Yes ☐ No The school district has taken the necessary action to ensure that I understand the proceedings of this IEP conference (including arrangement for an interpreter, if appropriate).
- ☒ Yes ☐ No I have received a copy of the IEP at no cost.
- ☒ Yes ☐ No I have been offered a copy of my parental rights at no cost.
- ☒ Yes ☐ No Parent Signature.

The document was signed by parent on Feb 11, 2016

Special Considerations**Student's strengths:**

Kevin has adjusted to coming to center. He rides the bus and comes into school most of the time without getting upset. He can sit during group for longer periods of time. He is beginning to attend to music and will occasionally hum. He smiles in response to positive interactions from adults and peers. He is able to find things to do during free play activities that are appropriate. Kevin is undressing for bathtime, and when it is time to eat he climbs in his high chair. If he wants something to eat, he will also go to his high chair.

Parental information, including concerns for enhancing their child's education:

Parent is concerned about Kevin responding to his name better, using eye contact, and communication skills.

Results of initial or recent evaluation(s):

Kevin was placed in services based on a verification of Developmental Delay, but we are pursuing further evaluation to look into a verification of Autism.

Results of child's performance on any general state and district-wide assessments:

Kevin has been assessed using the Teaching Strategies GOLD assessment and is significantly below age level in all areas except Gross Motor skills.

If behavior impedes learning, consideration of the use of positive behavioral interventions and strategies:

This was considered by the IEP team, but was deemed unnecessary at the time.

If student has Limited English proficiency, consideration of language needs:

This was considered by the IEP team, but was deemed unnecessary at the time.

If the student is blind or visually impaired, the IEP shall provide Braille instruction and the use of Braille, unless after an evaluation it is determined that Braille, and the use of Braille is not appropriate for the child:

This was considered by the IEP team, but was deemed unnecessary at the time.

Consideration of the Child's Communication Needs:

Kevin is currently a mostly non-verbal child. He will vocalize to express emotions, but has very few functional words. He will be exposed to sign language, pictures, and use of an Alternative/Augmentative Communication device that provides voice output

For children who are deaf or hard of hearing consideration of the following 3 areas:**1. Child's language and communication needs:**

--

2. Opportunities for direct communication with peers and professionals in the child's language and communication mode:

This was considered by the IEP team, but was deemed unnecessary at the time.

3. Academic level and opportunities for direct instruction in the child's language and communication mode:

This was considered by the IEP team, but was deemed unnecessary at the time.

Consideration of the Child's Need for Assistive Technology Service or Device:

Kevin will have access to sign language, pictures and an Alternative/Augmentative Communication device with voice output to aid in his ability to communicate with others in his environment.

Present Level of Academic Achievement and Functional Performance:

Includes how the child's disability affects the child's involvement and progress in the general education curriculum, or for preschool children, how their disability affects the child's participation in appropriate activities:

Kevin is non-verbal and has overall developmental delays that affect his ability to interact appropriately with peers and adults in his environment.

☒ Please check to confirm that you have addressed the student's needs in the area of Physical Education

Goals**Goal 1****Measurable Annual Goal:**

Kevin will increase skills in the following areas: imitation of actions and movements, ability to wait to begin an activity, ability to complete activities independently, follow the daily routine, follow instructions, complete activities involving sorting, and matching, and improve skills related to concepts of size, shape, color, quantity, and prepositions and to name family members in order for him to better communicate with others in his environment and to participate in preschool activities.

Short Term Objectives:**PROGRESS REPORT:**

Schedule: C - Semester

Evaluation Procedures/Instruments: Teacher Observation, Parent Report

Person(s) Responsible: Parent, Early Childhood Specialist

Review Dates: 05/13/2016, 09/23/2016, 02/10/2017

Statement of progress:

Statement of how student's progress will be reported to parents: (i.e., progress reports, letters, phone calls, etc.):

Progress reports on computer, notes home, personal conversations and parent/teacher conferences.

Statement of Special Education and Related Services:

Provide a statement of special education services provided to the child and include a description of the extent, if any, to which the child will not participate with nondisabled children in the regular classroom.

Center based preschool services.

Service	Duration		Location	Frequency			Service follows school calendar
	Start Date	End Date		Times/day	Frequency	Months	
Special Education Service							
Special Instruction (Resource)	Feb 11, 2016	Feb 10, 2017	Regular Early Childhood Program, <10 h/wk; Services at EC Program	200 min/day	2 days/week		Yes

Transportation**Child qualifies for special education transportation: No****Alternate Assessment****Assessment Criteria:**

- ☐ Yes ☐ No Does this student have a most significant cognitive disability?
- ☐ Yes ☐ No Is the student's course of study aligned to the extended indicators of the Nebraska College and Career Academic Standards?
- ☐ Yes ☐ No Does the student require extensive, direct individualized and substantial support to achieve measurable gains on the Nebraska College and Career Academic Standards for the grade they are enrolled?
- ☐ Yes ☐ No Is the decision to participate in the Alternate Assessment NOT BASED ON exclusionary factors as listed in the alternate assessment checklist?

Assessment Participation:

- ☒ Yes ☐ No The student will participate in regular state and district wide assessments.
- ☐ Yes ☒ No The student will participate in regular state and district wide assessments WITH accommodations.
- ☐ Yes ☒ No The student will participate in the state and district wide approved alternate assessment.

Extended School Year Services

If the child will participate in extended school year services, please describe:

not done at this age level

Prior Written Notice Section

Date of Note: ____/____/____

Date of Delivery: ____/____/____

Method of Delivery:

A description of the action proposed or refused by the school district or approved cooperative:

--

An explanation of why the district or approved cooperative proposes or refuses to take the action:

--

A description of other options the IEP team considered and the reasons why those options were rejected:

--

A description of each evaluation procedure, assessment, record or report the school district or approved cooperative uses as a basis for the proposal or refusal:

--

A description of any other factors which are relevant to the school district's or approved cooperative's proposal or refusal:

--

Parents of children with disabilities have rights which are protected under the procedural safeguards of the Individual with Disabilities Education Act (IDEA). If you would like a copy of your procedural safeguards, or if you have any questions regarding this notice or your rights, you may contact::

Name:

Phone Number:

Additional Resources You may contact any of the following resources to help you understand the federal and state laws for educating children with disabilities and parental rights granted by those laws. An explanation of your rights will be provided at no cost by any of the following organizations:

Nebraska Parent Training Center: 800-284-8520 or 402-346-0525

Nebraska Advocacy Services: 800-422-6091 or 402-474-3183



PARENTAL CONSENT FOR PUBLIC SCHOOL DISTRICT TO ACCESS MEDICAID FUNDING (MIPS Consent Form)

Student: KEVIN BARDWELL

School District: Norfolk Public Schools

School: Early Childhood Center

Parents: Kevin Bardwell Sr., Antoinette Brandy

State Law requires public schools to access Federal Medicaid funding for IEP and IFSP directed therapies provided to children eligible for Medicaid. Federal Law requires parental consent for districts to access this Medicaid funding. The district will not require parents or children to enroll in the Nebraska Medicaid program and claims will only be submitted when the child/student is eligible. Regardless, all required special education services must still be provided by the school district at no cost to the child or family. This consent is voluntary and may be withdrawn at any time. (Nebraska R.R.S. 43-2511; and 34 CFR 300.0 & 34 CFR 300.154)

This CONSENT/REFUSAL is made on behalf of the student/child named herein and applies only for therapies identified and actually provided during the effective period of this IEP/IFSP

☐ I give CONSENT to the public school district named herein to (a) disclose my child's personally identifiable information to the State agency responsible for administering my State's Public Benefits or Insurance Program Under State and Federal law, including IDEA and FERPA, and (b) access Medicaid funding on behalf of my child (named above) and understand that I may withdraw this consent at any time upon written notice to the public school district.

☐ I REFUSE to give consent to the public school district to (a) disclose my child's personally identifiable information to the State agency responsible for administering my State's Public Benefits or Insurance Program Under State and Federal law, including IDEA and FERPA, or (b) access Medicaid funding on behalf of my child and understand that my refusal will not affect the district's obligation to provide my child a Free Appropriate Public Education (FAPE) at no cost.

Parent Signature: _____ Date: ____/____/____

Gary Community School Corp

**Education Evaluation Report**

Date of Report: 05/31/2018
Individualized Education Program

Student: Kevin Marcus Bardwell**STN:** 471017004**Date of Birth:** 11/05/2012**Evaluation Type:** Reevaluation**Age:** 5**Evaluation Start Date:** 04/25/2018**Gender:** M**Current Grade:** Pre-School**School:** Mary M Bethune Early Child Dev Ctr (4057)**Guardian Information:****Relation:** Mother**Name:** Antoinette Brandy**Business Phone:** 219-201-4571**Home Phone:****Mobile Phone:****Address:** 409 west 20th Place Gary IN 46407**Primary Language:** English**Relation:****Name:****Business Phone:****Home Phone:****Mobile Phone:****Address:****Primary Language:****REASON FOR REFERRAL**

Kevin is a 5 year 6 month old African American male who was referred for a reevaluation to determine continued eligibility of special education services under a different category. Currently, he receives special education services for Developmental Delay and Language Impairment.

An individualized comprehensive educational evaluation was completed to inform special education eligibility and programming decisions. A discussion of the evaluation results and findings are presented below for each of the assessment domains that were addressed.

BACKGROUND INFORMATION**Social/Developmental History**

Kevin resides with his mother, Antoinette Brandy and his siblings: Christopher Gary/13 yrs, Janiah Taylor /11 yrs, Ja'Alyah Taylor/10 yrs, Kev'Von Bardwell/6 yrs, and Ka'Aliyah Bardwell/3 yrs. Kevin's father visits him at least once a week. English is the primary language spoken in the home.

Ms. Brandy reports that her pregnancy was full term and without complications. Kevin weighed 5 pounds 3 ounces at birth. His mother goes on to report that Kevin sat alone at 3 months, crawled at 6 months, walked alone at 12 months, and is nonverbal.

Kevin's previous evaluation indicated that he experienced a mild hearing loss in his left ear. He has a diagnosis of Autism Spectrum Disorder.

Medical and Mental Health Information

Medical Update: 5/21/18: Student tested for autism 9/16/16, child diagnosed with Autism Spectrum disorder. Parent reports child does not talk and had a skin graft to his feet at age 2, reason not reported to nurse. The child has Dr. Iyer as the Pediatrician. At present, there is no vision or hearing screening available. (B. Grey, RN)

OBSERVATIONS**Observations in the Learning Environment**

Kevin uses a picture schedule to manage his day as well as using pictures to make request/get needs and wants met. He is making choices from pictures. Kevin has mastered following simple 1-step directions, and completes tasks in his independent work area when given verbal and visual cues. He does not require any assistance to remain seated during structured activities and he is participating without adult assistance during songs and finger plays. He is able to identify simple noun pictures from our vocabulary units from a field of 2 pictures. Kevin is beginning to repeat words approximations (ca/cat) and occasionally names pictures without cues.

Systematic Observations

The ABAS-3 measures adaptive behavior at three different levels. At the highest level is the General Adaptive Composite (GAC), which is composed of all measured skill areas and thus provides an overall estimate of adaptive behavior. Kevin obtained a GAC of 74 (4th percentile) which falls within the Low range. At the next level are the three adaptive domains, each comprising multiple individual skill areas: Conceptual, Social, and Practical. Results of an ABAS-3 administration can help identify a person's strengths and limitations, and allow professionals to plan, implement, and monitor interventions.

The *Conceptual* Composite consists of behaviors needed to communicate with others, apply academic skills, and manage and accomplish tasks. Kevin obtained a standard score of 63 (1st percentile) which falls within the Extremely Low range in this area.

The *Social* Composite consists of behaviors needed to engage in interpersonal interactions, act with social responsibility, and use leisure time. Kevin obtained a standard score of 71 (3rd percentile) which falls within the Low range in this area.

The *Practical* Composite consists of behaviors needed to address personal and health needs; take care of home, classroom/work, and function in a community. Kevin obtained a score of 85 (16th percentile) which falls within the Below Average range in this area.

Adaptive Behavior Assessment System, Third Edition (ABAS-3) Teacher/Daycare Provider Rating Ages 0-5

Subtest / Composite	Standard Score	Scaled Score	Confidence Level	Percentile	Assessment Provider Name
Communication	N/A	3	N/A	N/A	Ericka Wills-Cox
Functional Pre-Academics	N/A	4	N/A	N/A	Ericka Wills-Cox
School Living	N/A	10	N/A	N/A	Ericka Wills-Cox
Health and Safety	N/A	6	N/A	N/A	Ericka Wills-Cox
Leisure	N/A	8	N/A	N/A	Ericka Wills-Cox
Self-Care	N/A	8	N/A	N/A	Ericka Wills-Cox
Self-Direction	N/A	6	N/A	N/A	Ericka Wills-Cox
Social	N/A	1	N/A	N/A	Ericka Wills-Cox
Motor	N/A	9	N/A	N/A	Ericka Wills-Cox
General Adaptive Composite	74	N/A	72-76	4	Ericka Wills-Cox
Conceptual Composite	63	N/A	59-67	1	Ericka Wills-Cox
Social Composite	71	N/A	67-75	3	Ericka Wills-Cox
Practical Composite	85	N/A	81-89	16	Ericka Wills-Cox

PRIOR INTERVENTIONS AND PROGRESS

Kevin is following his picture schedule to manage his day as well as using pictures to make request/get needs and wants met. He has mastered making choices from a field of at least 6-8 pictures. Kevin has mastered following simple 1-step

directions directions, and is able to complete 2 tasks in his independent work area when given verbal and visual cues. He does not require any assistance to remain seated during structured activities and he is participating without adult assistance during songs and finger plays. He is able to identify simple noun pictures from our vocabulary units from a field of 2 pictures. Kevin is beginning to repeat words approximations (ca/cat) and occasionally names pictures without cues.

EVALUATION FINDINGS

Academic

Kevin is progressing in academic skills. He can recognize his name in print and identify (pointing/matching) most letters and their corresponding sounds. He is tracing and copying the letters in his name and bubble numbers 1-10 and can recognize some color words. Kevin is working on matching a set quantity to the numbers 1-5 he is starting to get 1-3 but need assistance with higher numbers. Kevin can distinguish big/little and is able to to group/sort by color, shape and size (big/little). He completion of tasks improves with an adult model for first few and then is able to complete on his own. Kevin follows classroom routines independently and is improving attention to stories that are read to him.

Communication

The Receptive One Word Picture Vocabulary Test -4 (ROWPVT-4) and the Expressive One Word Picture Vocabulary Test -4 (EOWPVT-4) was administered to assess Kevin's ability to understand and name vocabulary at the one word level. An average score is between 85 to 115, with a Standard Deviation of 15 points. Results of these test indicate a score more than 3 Standard Deviations below the mean score of 100 points. Kevin attended well and participated during the ROWPVT-4 but was very distracted for the EOWPVT-4 in spite of maximum cues by the therapist. Therefore, results of the EOWPVT-4 may not be an accurate representation of Kevin's true ability to name objects in pictures.

During the EOWPVT-4, Kevin was able to produce the word approximations to name pictures.

Expressive One-Word Picture Vocabulary Test, 4th Edition (EOWPVT-4)

05/29/2018

Subtest / Composite	Standard Score	Raw Score	Percentile	Assessment Provider Name
General	<55	2	<1	S. Crabtree-Timmons, SLP

Receptive One-Word Picture Vocabulary Test-4th edition (ROWPVT-4)

Adaptive Behavior

The **Developmental Assessment of Young Children, Second Edition (DAYC-2)** was developed to measure the abilities of young children in five areas: cognition, communication, social-emotional, physical development, and adaptive behavior. The DAYC is a comprehensive tool for infants and young children. It assesses the primary developmental domains and provides useful data with respect to developmental status. Average scores are 90-110. The *Adaptive Domain* measures independent, self-help functioning. Kevin obtained a score of 82/ Below Average (12th percentile).

Developmental Assessment of Young Children, 2nd Edition (DAYC-2)

Subtest / Composite	Standard Score	Confidence Level	Percentile	Descriptive Classification	Assessment Provider Name
Adaptive Behavior	82	79-85	12	Below Average	Ericka Wills-Cox

Motor Skills

Occupational Therapy Report May 2018 Deborah Surface OTR

I. Assessments:

X Classroom Observation X Peabody Developmental Motor Scales

 Bruninks-Oseretsky Test of Motor proficiency

II. General Observation: Kevin has a tendency to sit with his fingers in his ears whenever there is any noise that he can not control.

III. Seating: Kevin sits a regular child's table and chair within the classroom.

IV. Gross Motor : Kevin presents with generalized low tone through out his extremities. He walks and sits with good posture generally.

V. Fine Motor:

A. **Hand Dominance:** Kevin used his left hand to hold the pencil, right hand attempted to hold the paper.

B. . He used both hands to stack blocks into a tower.

C. **Grasp:** Kevin used an mature grasp on the pencil with his thumb and first two fingers

He is able to utilize good solid grasp strategies when manipulating objects such as pegs or blocks.

D. **Visual:** Kevin visually attended what he was writing or manipulating.

E. **Visual Motor:** Kevin made horizontal marks on the paper. He attempted to color in a circle. He was able to place 3 pegs in and out of a pegboard and place 3 shapes in a shape board. He stacked 10 blocks. He was unable to trace a horizontal or vertical line, or copy shapes. He was unable to fold paper, or use scissors except to snip.

VI. Sensory:

A. **Auditory:** Kevin is unable to ignore extraneous auditory stimulus. He places his fingers in his ears to attempt to control noise level. Therapeutic listening was attempted. He seemed to really enjoy the music that was played into the headphones. It took several attempts to remove the headphones before he allowed it. He certainly wanted to keep the headphones on and continue to listen to the music.

B. **Balance:** This area was not directly assessed.

C. **Vestibular:** This area was not directly assessed.

D. **Proprioception:** (proprioception: innate knowledge of where body is in space)

Kevin's knowledge of where he is in space and what his body is doing seems to be diminished, possibly due to his generalized low tone. It is believed that all the extraneous movement and tapping is proprioceptive in nature.

E. Tactile: Kevin demonstrated tactile defensiveness. He hesitantly touched things presented and would rub his body where it was touched.

F. Vision: Kevin was not able to smoothly visually track or visually converge. He would hold onto the stimulus for a very short time then lose it/look away.

VII. Self Help : This area was not assessed at this time.

VIII. Social: Raimele was very friendly and attempted everything asked of him to the best of his ability.

Recommendations:

1. **Direct Occupational Therapy**, also utilize consultation and **training** of teacher
2. **Frequency:** OT treatment 30 minutes twice a month focusing on the following
 - a) Increase fine motor, visual motor and bilateral motor skills and hand function so he can perform age appropriate fine motor skills needed in the classroom.
 - b) Increase sensory processing, deep pressure, visual distractibility, vestibular and auditory sensitivity that interrupt and block his ability to acquire skills needed to access his education

Peabody Developmental Motor Scales, 2nd Edition (PDMS-2)
05/09/2018

Subtest & Composite	Descriptive Classification	Assessment Provider Name
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Additional Assessments

The Gilliam Autism Rating Scale-Third Edition (GARS-3) is a norm-referenced screening instrument used to identify persons who have autism spectrum disorders. Its content is based on the definitions of autism from the Psychiatric Association (2012) and the Autism Society (2012). Kevin obtained an Autism Index score of 116 (86th percentile), within the Very Likely Probability of ASD range, Requiring Very Substantial Support-Level 3.

SYNTHESIZED SUMMARY AND CONCLUSIONS

Kevin is a 5 year 6 month old African American male who was referred for a reevaluation to determine continued eligibility of special education services under a different category. Currently, he receives special education services for Developmental Delay and Language Impairment.

Kevin was diagnosed with Autism Spectrum Disorder by Dr. Elizabeth Magno on 12/06/2017.

Kevin's adaptive skills are within the Below Average to Extremely Low range, as measured by the ABAS-3 and DAYC-2. In addition, he exhibits multiple symptoms of Autism Spectrum Disorder-as measured by the GARS-3.

Autism Spectrum Disorder is defined by Article 7 of Indiana State Board of Education Article 7 (511 IAC 7-41-1) as a lifelong developmental disability that includes Autistic Disorder, Aspergers' syndrome, and other pervasive developmental disorders, as described in the current version of the American Psychiatric Association's Diagnostic Statistical Manual of Mental Disorders. The disability is generally evident before three years of age and significantly affects verbal, non-verbal, or pragmatic communication and social interaction skills and results in an adverse effect on the student's educational performance. Kevin's assessment data and outside diagnosis of Autism Spectrum Disorder fulfills this eligibility for Autism Spectrum Disorder(**Severity Level 3-Requiring Very Substantial Support**). Eligibility for special education as a student with Autism Spectrum Disorder disability shall be determined by the multidisciplinary team.

Kevin no longer fulfills the eligibility criteria for Developmental Delay.



Department of Exceptional Children

Privacy Statement for Psycho-educational Reports

It is a violation of this student's privacy rights to distribute, either electronically or in hard copy form, the attached psychoeducational report except for distribution to the parent or with written parental consent (unless otherwise allowable by FERPA). A copy of the report may be printed for inclusion in the special education file. It is not permissible to download the report to a computer or any other electronic device. Only those professionals who are directly involved in the education or support of this student may view this report.

Kevin Bardwell report
Corrected and revised 10-18-21

CONFIDENTIAL

**SHELBY COUNTY SCHOOLS
DEPARTMENT OF EXCEPTIONAL CHILDREN
PSYCHO-EDUCATIONAL EVALUATION**

Restrictions: Information in this report is confidential. This information should not be given to any other organization or individual without written permission of the parent or legal guardian.

Name:	Kevin Bardwell	Date of Birth:	11-5-12
Student # (last 4 digits):		Age:	Eight
School:	Lucie E. Campbell Elem.	Race:	Black
Parent:	Kevin Bardwell Sr.	Sex:	Male
Address:	2404 Whitney Avenue	Grade:	Third
Dates of Evaluation:	9-1-21	Examiner:	William E. Graves

Reason for Referral:

The IEP Team referred Kevin for a psycho-educational evaluation to help determine eligibility for special education services in the state of Tennessee. He previously received special education services in Indiana with a diagnosis of Developmental Delay. There is also a diagnosis of Autism Spectrum Disorder from Bridget M. Harrison, Ph.D. in a report dated 8-7-18. Kevin received services through Innovations in Learning in Merrillville, Indiana. The current evaluation will help determine eligibility for services according to the state of Tennessee special education criteria.

Previous Testing:

Previous psycho-educational records were not able to be obtained from the school district in Indiana.

Sources of Information:

Parent Interview

Teacher Interview

Records Review

Vision screening passed: 7-26-21

Hearing screening passed: 7-26-21

Instruments Administered: Scores are on the Test Data Summary following report

Wechsler Nonverbal Scale of Ability (WNV)

Woodcock-Johnson IV Tests of Achievement (WJ-IV)

Vineland Adaptive Behavior Scales, Third Edition, Parent/Caregiver Form

Gilliam Autism Rating Scale - Third Edition (GARS-3)

Behavior Assessment System for Children, Second and Third Edition

Systematic Adaptive Behavior Characteristics Checklist

Classroom Observation

Name: Kevin Bardwell
DOB: 11-5-12

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Relevant Background Information:

Kevin Bardwell Sr., Kevin's father, provided background information regarding family, developmental, and educational history. Kevin lives with his father, stepmother, older brother, and two younger sisters. He has lived with his aunt and his grandmother in the past. Kevin's biological mother is currently incarcerated.

Mr. Bardwell reported that there were no difficulties or complications during pregnancy or delivery. Kevin is generally in good health and takes no medications on a regular basis. He sustained second degree burns on both of his feet at age two from hot water running in a bathtub. Some developmental milestones were met within normal limits. However, the parents became concerned about Kevin's development at age one because he wasn't responding normally to others.

Kevin has attended programs for special needs children since preschool age. Background information from a previous report reveals a history of lining up items such as toys, boxes, and candy; repetitive behaviors such as humming and jumping in place; and rigidity in the storing of his personal items. If these patterns are disrupted Kevin would typically tantrum, which would include screaming, crying, and throwing. Kevin received services in special needs programs in Nebraska and Indiana prior to moving to Memphis last school year. He attended second grade mostly virtually last year at Lucie E. Campbell Elementary and is now struggling in his third grade class this year.

Assessment Results and Interpretation:

Kevin was evaluated at Lucie E. Campbell Elementary on 9-1-21. He is a boy of average size for his age, who was neatly dressed and wore his glasses when seen by the examiner. Kevin has limited response to directions and limited verbal expression. Verbal responses were limited to repeating words or phrases spoken by the examiner. He frequently retied his shoes during the testing and while walking down the hallway. Kevin also started laughing at times for no apparent reason. Assessment results are believed to be a valid estimate of Kevin's current level of functioning.

As an alternative cognitive assessment the *Wechsler Nonverbal Scale of Ability (WNV)* was administered. This is an individually administered clinical instrument designed to measure general cognitive ability using a variety of nonverbal subtests. The WNV was developed so that general ability could be measured with subtests that eliminate or minimize verbal requirements. Subtest T scores are obtained with a mean of 50 and a standard deviation of 10. The sum of the T scores is then used to derive the Full Scale score, which has a mean of 100 and a standard deviation of 15.

As measured by the *Wechsler Nonverbal Scale of Ability* Kevin obtained a Full Scale IQ score of 48 (46-59 at the 90% confidence interval). A score of this magnitude falls more than two standard deviations below the mean and indicates functioning in the Extremely Low range. It should be noted that the current IQ score is an estimate of Kevin's level of cognitive functioning, based on a

Name: Kevin Bardwell
DOB: 11-5-12

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limited sample of behavior on two subtests, matrices and spatial span. Kevin did not seem to comprehend what was expected of him on the coding and picture arrangement subtests.

The *Woodcock-Johnson IV Tests of Academic Achievement* is an individually administered test of academic achievement. It yields standard scores that are set to a mean of 100 and a standard deviation of 15.

As measured by the *Woodcock-Johnson IV Tests of Academic Achievement*, Kevin displayed academic skills which are significantly below expectation for his current grade level. He generally demonstrated academic skills at or below the kindergarten level. In reading Kevin was able to identify letters of the alphabet, but was not able to read any words or comprehend reading passages. In math he was able to write numbers, but was not able to perform any mathematical operations. In written language Kevin was able to write letters of the alphabet and spelled his first name. He was not able to spell any other words or write a sentence. Current WJ-IV standard scores are commensurate with the level of cognitive ability displayed on the WNV.

The *Vineland-3 Adaptive Behavior Scales – Parent/Caregiver Form* was completed by the father in order to obtain a measure of Kevin's adaptive functioning at home. His Adaptive Behavior Composite Score according to this measure was 66, which places him at the 1st Percentile. His standard scores were: Communication Domain 54 (<1st Percentile); Daily Living Skills Domain 70 (2nd Percentile); Socialization Domain 77 (6th Percentile); and Motor Skills 74 (4th Percentile). Kevin's adaptive functioning falls in the low range.

The *Vineland-3 Adaptive Behavior Scales – Teacher Form* was completed by Maya Alston, third grade teacher, in order to obtain a measure of Kevin's adaptive functioning at school. His Adaptive Behavior Composite Score according to this measure was 47, which places him below the 1st Percentile. His standard scores were: Communication Domain 40 (<1st Percentile); Daily Living Skills Domain 47 (<1st Percentile); Socialization Domain 54 (<1st Percentile); and Motor Skills 62 (1st Percentile). Kevin's adaptive functioning at school falls in the low range.

Systematic adaptive behavior characteristics checklists were also completed revealing significant deficits in communication, community use, functional academics, school living, self-direction, and socialization.

Additional behavior checklists were administered to assess behaviors suspected to be related to autism. Kevin's parents and Mrs. Alston, third grade teacher, completed the Gilliam Autism Rating Scale – Third Edition (GARS-3), which assesses restrictive/repetitive behaviors, social interaction, social communication, emotional response, cognitive style, and maladaptive speech.

Both the parent and teacher forms were completed with similar results. The father's responses resulted in an Autism Index score of 81 and the teacher's responses resulted in an Autism Index score of 97. Both scores indicate that the probability of a diagnosis of Autism Spectrum Disorder is very likely and also indicate a severity level of 2 (requiring substantial support).

Name: Kevin Bardwell
DOB: 11-5-12

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The BASC3 was completed by the father to measure emotional and behavior concerns at home. All composite and scale scores were in the average range. At home Kevin does not appear to experience any significant emotional problems such as anxiety or depression; nor does he exhibit any significant externalizing problems such as hyperactivity or aggression.

The BASC3 was completed by Mrs. Alston, third grade teacher, to assess emotional and behavior problems in the school setting. Her responses resulted in scores in the clinically significant range on the Externalizing Problems composite, the Internalizing Problems composite, the School Problems composite, the Behavioral Symptoms Index, and on scales measuring hyperactivity, aggression, conduct problems, anxiety, somatization, learning problems, and atypicality. Scores in the at-risk range were obtained on scales measuring depression, attention problems, and withdrawal. There were no scores in the average range. Mrs. Alston describes Kevin's behavior as often unpredictable. He leaves his seat and moves around, disrupts other students, clings to or throws his weight onto others at times, makes noises, and has emotional outbursts.

The examiner observed Kevin in his third grade math class for about thirty minutes on 9-1-21. While being observed Kevin sat a group of desks with two other students. The class was involved in a multiplication lesson. Each student had a dry erase board and marker and was asked to solve problems such 2 times 7. Initially Kevin drew a picture on his board, then erased it and drew another picture. Eventually he looked at the classmate's board next to him and copied what she had written. Kevin did not seem to comprehend the math lesson or the mathematical operation of multiplication. He did stay in his seat and demonstrated appropriate behavior during the lesson. At the conclusion of the lesson the teacher instructed the students to put away their boards and line up for lunch. Kevin did that and lined up. He seems to adapt and comply with classroom routines by observing the other students and doing what they do.

The examiner continued to observe Kevin on the way to and in the cafeteria setting. He stopped to tie his shoe on the way to the cafeteria and retied it once again while in line in the cafeteria. A classmate helps him stay on task in the cafeteria and guided him through the correct line to eat his lunch. Kevin got his lunch and followed his classmates to the correct table. He brought a pop tart from home, which he ate first. Then he ate his lunch with no behavior issues. Kevin did not talk or interact with his classmates at the lunch table. Overall, Kevin seems to like school and makes it through his day by mimicking the actions and routines of his classmates.

Summary and Conclusions:

Kevin is an eight-year-old third grade student at Lucie E. Campbell Elementary. The IEP Team referred him for a psycho-educational evaluation to help determine eligibility for special education services by state of Tennessee standards. He previously received special education services in Indiana with a diagnosis of Developmental Delay. There is also a report from a private psychologist documenting a diagnosis of Autism Spectrum Disorder. The current evaluation will help determine present levels of performance, as well as determining eligibility according to state of Tennessee special education criteria.

Results of the current psychoeducational assessment reveals cognitively functioning in the extremely low range. Kevin obtained a Full Scale IQ score of 48 on the WNV. Limited

Name: Kevin Bardwell
DOB: 11-5-12

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achievement testing was completed with the WJ-IV, revealing academic skills at or below kindergarten level. Adaptive functioning is significantly impaired at home and at school, according to results of the parent Vineland-3. Kevin obtained Adaptive Behavior Composite scores of 66 and 47 on the parent and teacher Vinelands respectively. Adaptive behavior characteristics checklists were completed which also reveal significant deficits in adaptive functioning.

Additional data was obtained to assess behaviors possibly related to autism. The parents had concerns regarding Kevin's development beginning about age one. He displays abnormal functioning in terms of socializing and relating to people as well as significant communication deficits. Most of Kevin's verbal expression is echolalic. Kevin does not talk to or socialize with his peers at school. He does mimic their actions and routines to navigate the school day and seems to enjoy school. The parent and teacher completed the GARS-3, which assesses behaviors related to autism. Their responses resulted in Autism Index scores of 81 and 97 which both indicate a very likely probability of Autism Spectrum Disorder.

Kevin meets the state of Tennessee Autism eligibility standards in the following ways:

(1) Difficulty relating to others or interacting in a socially appropriate manner. This was documented by the parent and the teacher on the GARS-3. The examiner also observed a total lack of social interaction with his peers in the classroom and the cafeteria.

(2) Absence, disorder, or delay in verbal and/or nonverbal communication. Kevin has little or no verbal communication with others. This has been observed and documented by teachers, the speech language pathologist, and the examiner. Most of Kevin's verbal expression is echolalic in nature.

3) One or more of the following: a) insistence on sameness as evidence by restricted play patterns, repetitive body movements, persistent or unusual preoccupations, and/or resistance to change or b) unusual or inconsistent responses to sensory stimuli. Kevin has a history of repetitive behaviors at home; such as lining items up, rigidity in storing items, and making noises and jumping.

Kevin demonstrated the preceding eligibility standards by age 3. Additionally, the characteristics as defined above are present and cause an adverse effect on his educational performance in the classroom or learning environment.

Based on the results of this evaluation, Kevin's learning problems are considered not to be primarily due to a lack of instruction in reading or math; visual, hearing, or motor impairments; emotional disturbance; environmental, cultural, or economic disadvantage; limited English proficiency; motivational factors; or situational traumas.

Evaluation data reveals that Kevin appears to meet the state of Tennessee psychometric criteria for special education services, as a student with Autism and an Intellectual Disability. However, the final eligibility determination will be made by the IEP Team. In order to be diagnosed as Intellectual Disability, a child shall meet the following eligibility standards: (1) significantly impaired intellectual functioning, which is two or more standard deviations below the mean, (2) significantly impaired adaptive behavior in the home or community as indicated by a composite

Name: Kevin Bardwell
DOB: 11-5-12

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score two or more standard deviations below the mean, (3) significantly impaired adaptive behavior in the school as determined by a standardized measure of adaptive functioning, (4) delays in intellectual abilities as indicated by the developmental history, and (5) the above characteristics cause an adverse effect on educational performance in the general education classroom or learning environment.

The results of this assessment and other evaluation information should be reviewed by the Eligibility/IEP Team to determine if the child meets the state definition of "a child eligible for Special Education." (A child "eligible for Special Education" means a child or youth, who meets the definition of a child with a disability, and has been determined by an IEP Team to be unable to be educated appropriately in the general education program without the provision of Special Education.)

Recommendations:

1. An informing conference will be held with the parents as part of the IEP meeting to give them an understanding of Kevin's current level of functioning. They will receive a copy of this report at that time.
2. The IEP Team will determine the most appropriate modifications, interventions, and placement.
3. Further options for addressing behavior issues will be discussed during the IEP meeting.

These evaluation results and recommendations will be discussed with the parents and school personnel.

William E. Graves Jr., Ed.S. 9-14-21
 William E. Graves Jr., Ed.S. Date
 Licensed School Psychologist

Mary R. Berk, Ph.D. 9-14-21
 Mary Berk, Ph.D. Date
 Supervising Psychologist
 Licensed Psychologist/HSP

Name: Kevin Bardwell
DOB: 11-5-12

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TEST DATA SUMMARY

WECHSLER NONVERBAL SCALE OF ABILITY (WNV)

Subtest	TScore
Matrices	11
Spatial Span	33
Full Scale IQ Score	48

(Composite scores have a mean score of 100 and a standard deviation of 15).

Name: Kevin Bardwell
DOB: 11-5-12

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WOODCOCK-JOHNSON IV TESTS OF ACHIEVEMENT (WJ-IV)

Norms based on age

	<u>Grade Equivalent</u>	<u>Percentile</u>	<u>Standard Score</u>
Clusters			
Basic Reading Skills	<K.0	<0.1	<40
Mathematics	<K.0	<0.1	<40
Written Language	<K.0	<0.1	<40

Standard Scores have a mean of 100 and a standard deviation of 15.

Subtests

Letter-Word Identification	<K.0	<0.1	<40
Applied Problems	<K.0	<0.1	<40
Spelling	<K.0	<0.1	50
Passage Comprehension	<K.0	<0.1	<40
Calculation	<K.0	<0.1	<40
Writing Samples	<K.0	<0.1	<40
Word Attack	<K.0	<0.1	<40

Name: Kevin Bardwell
DOB: 11-5-12

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VINELAND-3 ADAPTIVE BEHAVIOR SCALES: PARENT/CAREGIVER FORM

	Percentile	Standard Score
Communication Domain	<1	54
Daily Living Skills Domain	2	70
Socialization Domain	5	77
Motor Skills Domain	4	74
Adaptive Behavior Composite	1	66

Standard scores have a mean of 100 and a standard deviation of 15.

VINELAND-3 ADAPTIVE BEHAVIOR SCALES: TEACHER FORM

	Percentile	Standard Score
Communication Domain	<1	40
Daily Living Skills Domain	<1	47
Socialization Domain	<1	54
Motor Skills Domain	1	62
Adaptive Behavior Composite	<1	47

Standard scores have a mean of 100 and a standard deviation of 15.

GILLIAM AUTISM RATING SCALE - THIRD EDITION (GARS-3)

Parent Form, Autism Index: 81 Probability of ASD: Very Likely Severity Level: 2

Teacher Form, Autism Index: 97 Probability of ASD: Very Likely Severity Level: 2

Severity Level 2 indicates requiring substantial support

Name: Kevin Bardwell
DOB: 11-5-12

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	Parent Form	Teacher Form
BEHAVIOR ASSESSMENT SYSTEM FOR CHILDREN, THIRD EDITION		
Caution Indexes		
F Index (negativity)	A	C
Response Pattern	A	A
Consistency	A	A
Behavioral Symptom Index	53	79
Externalizing Problems Composite	53	82
Internalizing Problems Composite	38	76
School Problems Composite		74
Hyperactivity	55	79
Adaptive Scale scores	40	60
Conduct Problems	53	81
Anxiety	36	75
Depression	42	65
Somatization	43	71
Atypicality	56	92
Withdrawal	52	62
Attention Problems	58	65
Adaptive Skills Composite	38	26

Scores of 60-69 are At Risk

Scores of 70 or above are Clinically Significant

All scores are T-scores (Mean= 50)

Caution Indexes A = Acceptable C = Caution

Adaptive Scale scores of 30 or below are Clinically Significant



Shelby County School District
160 S. Hollywood Street
Memphis, TN 38112

Individual Education Program (IEP)

From: 10/ 8/2021 To: 08/22/2022

☐ Annual

☒ Addendum

Student Information

Student: Kevin Bardwell Birthdate: 11/05/2012 Grade: 3rd Grade

(first)

(last)

State ID: 5132885

Student ID: 493904

Gender: M

Hispanic Ethnicity: No

Race: Black or African American

School: Lucie E. Campbell Elementary

District: Shelby County School District

Primary Disability:	Autism	Re-evaluation of Eligibility Date:	10/18/2024
Secondary Disability:	Intellectual Disability		

Medical Information: Previous data shows that he is a student diagnosed with Autism Spectrum disorder.

Relationship to Student: Both Parents /Guardian

Name: Eboni Guy

Home Phone: 901-501-8993

Address: 2404 Whitney Ave, Memphis, TN, 38127-8302

Cell Phone: 901-501-8993

Relationship to Student: Father /Guardian

Name: Kevin Bardwell

Home Phone: 901-491-0417

Address: 2404 Whitney Ave, Memphis, TN, 38127-8302

Cell Phone: 901-491-0417

Student Name: Kevin Bardwell
DOB: 11/05/2012

Shelby County School District
IEP Meeting Date: 10/18/2021

Current Descriptive Information

Describe the student's strengths

Kevin is polite, he treats adults/peers and their belongings with respect. He has appropriate attendance. Kevin seems to prefer math over reading.

Describe the concerns of the parents regarding their student's education

Parents are concerned about Kevin's speech and academics. They feel that Kevin doesn't have the math and reading skills to be successful in the regular educational setting..

Describe how the student's disability adversely impacts his/her access to participation in the general curriculum:

Kevin meets the state of Tennessee eligibility standards to be identified as a student with Autism and an Intellectual Disability. Due to his disabilities, Kevin has difficulty communicating and relating to others in a socially appropriate manner. He also exhibits significantly impaired intellectual functioning and adaptive functioning. The characteristics of the disability adversely impact the student's rate of academic progress in the general education curriculum.

Consideration of Special Factors for IEP Development

Does the student have limited English proficiency? No

If yes, what is his/her primary mode of language? English

Is the student blind or visually impaired? No

If yes, does the student need instruction in Braille? NA

Does the student have communication needs? Yes

If there are communication needs, does the student have a consistent, reliable, and effective mode of communication? Yes

If the student does not have a consistent, reliable, and effective mode of communication, in what ways does the student respond and engage with their environment?

N/A

Is the student deaf or hard of hearing? No

If yes, did the IEP Team consider:

- a. the student's language and communication needs; N/A
- b. opportunities for direct communications with peers and professional personnel in the student's language and communication mode; N/A
- c. necessary opportunities for direct instruction in the student's language and communication mode? N/A

Is an assistive technology device or service necessary in order to implement the student's IEP? No

If yes, how will AT be addressed in the student's programming?

Student Name: Kevin Bardwell
DOB: 11/05/2012

Shelby County School District
IEP Meeting Date: 10/18/2021

- ☐ Accommodations ☐ Supplemental Aids and Services (Note: Please ensure any AT equipment/devices and services are added as a Supplemental Aid in the Services and Supplemental Aids section within the IEP Process) ☐ Goals and Objectives
- ☐ Related Services ☐ Other : NA

Does the student's behavior impede his/her learning or that of others? No
If yes, the IEP Team has addressed the student's behavior in the following way(s):

- ☐ Functional Behavior Assessment ☐ Behavior Intervention Plan ☐ Accommodations
- ☐ Goals and Objectives ☐ Other (write in NA

Does the student demonstrate cognitive processing deficits that impact his/her classroom performance and warrant consideration in the development of the IEP (i.e. accommodation use)? Yes

If you chose "Yes," please explain: Comprehensive data shows evidence of significantly impaired intellectual functioning. Impaired intellectual functioning can impair the ability to complete tests and assignments within usual time frames. Additional time may be needed on such tasks.

Present Levels of Performance

Levels of functioning, should when applicable, include norm referenced and/or criterion referenced data, as well as descriptive information of the student's deficit areas.

Assessment Area: PL-Academics-Basic Reading Skills

EXCEPTIONAL? Yes

Present Level of Performance: According to the results of the I-Ready reading Diagnostic, Kevin recognizes and name all uppercase letters of the alphabet, is in the early stages of learning basic vocabulary words, and is in the early stages of learning high-frequency words. His Lexile reading measure is BR320L and his Lexile range is BR400L-BR270L. However, Kevin has not acquired fundamental decoding skills and needs instruction in Phonics. His score indicates that he has gaps in grade-level word knowledge.

Impact of Mastery of Standards: Kevin is in Tier III, and is performing significantly below his peers at the same grade level. This will have a negative impact on his mastery of grade level reading skills. He will need a human reader, accommodations and modifications to be successful in the general education setting.

Source of Information: I-Ready

SubTest: Reading

Date Administered: 08/20/2021

Grade Equiv. - KK

Std. Score - 306

Percentile Rank - 1st

Student Name: Kevin Bardwell
 DOB: 11/05/2012

Shelby County School District
 IEP Meeting Date: 10/18/2021

Assessment Area: PL-Academics-Math Calculation

EXCEPTIONAL? Yes

Present Level of Performance: According to the KTEA-3rd Edition, Kevin was able to point to the numbers "2" and "6". He was able to recognize a square and a triangle. However, Kevin was not able to do any simple addition or subtraction.

Impact of Mastery of Standards: Kevin is performing significantly below his peers in math and is in need of intensive intervention. This causes a negative impact on his mastery of grade level standards. Kevin will need accommodations and modifications.

Source of Information: Kaufman Test of Educational Achievement, Third Edition

SubTest: Math Computation

Date Administered: 08/23/2021

Grade Equiv. - <K

Score - 3

KB v. SCBE Due Process
 SCS 000179

Student Name: Kevin Bardwell
DOB: 11/05/2012

Shelby County School District
IEP Meeting Date: 10/18/2021

Assessment Area: PL-Language

EXCEPTIONAL? Yes

Present Level of Performance: Kevin demonstrates severely restricted oral expressive and receptive language skills for a student of his age. He typically uses no spontaneous verbalizations during communicative exchange. Kevin is able to label or name common objects but struggles with using action concepts, demonstrating his understanding and use of location concepts. Kevin demonstrates the understanding and use of some basic concepts such as identifying colors and body parts. He also demonstrates strengths in his attention to task, sustained concentration and engagement, compliance with school rules, awareness and adherence to personal space. Kevin is able to demonstrate understanding of turn taking skills as well as use of eye contact. Kevin struggles to produce verbal utterances for the social purposes of language other than labelling or answering.

Impact of Mastery of Standards: Kevin's communication system is severely restricted and prevents him from demonstrating as well as verbalizing his mastery of age and grade level content.

Source of Information: Observation - Language

SubTest: General

Date Administered: 10/09/2021

Narrative - Kevin demonstrated many strengths as follows: his compliance with tasks, his ability to sustain attention within and across tasks, his positive response to simple one step verbal directions, his demonstration of understanding school rules, his ability to verbally label a variety of common objects, his production of speech with consistent good intelligibility and using a vocal volume sufficient to allow effective transmission of his message to others in the interaction, as well as to make and sustain eye contact throughout interactions.

KB v. SCBE Due Process
SCS 000180

Student Name: Kevin Bardwell
DOB: 11/05/2012

Shelby County School District
IEP Meeting Date: 10/18/2021

Assessment Area: PL-Pre-vocational

EXCEPTIONAL? Yes

Present Level of Performance: Kevin is polite, he treats adults/peers and their belongings with respect. He has appropriate attendance, maintains proper dress code and has the ability to get along with peers. However, he struggles to work alone without redirection/reassurance, attempt/begin assignments, and stay on task until completion in assignments in a timely manner. He also struggles to control temper in all situations, follow written/spoken directions effectively and recite/write personal data.

Impact of Mastery of Standards: Kevin's prevocational skills compares poorly to peers compared to his age. These deficits make it difficult for him to master grade level standards.

Source of Information: Prevocational Skills Checklist

SubTest: Classroom Performance	Date Administered: 08/23/2021	Passed Y or N - N
SubTest: Behavior	Date Administered: 08/23/2021	Passed Y or N - N
SubTest: Cooperation	Date Administered: 08/23/2021	Passed Y or N - N
SubTest: Self Help	Date Administered: 08/23/2021	Passed Y or N - N

KB v. SCBE Due Process
SCS 000181

Student Name: Kevin Bardwell
DOB: 11/05/2012

Shelby County School District
IEP Meeting Date: 10/18/2021

Measurable Annual Goals and Benchmarks/Short-term Instructional Objectives for IEP and Transition Activities

Goal 1 of 7

Area of Need: Pre-vocational

Personnel/Position Responsible: SCS Personnel

Annual Goal: Given verbal prompts, Kevin will improve his performance of prevocational tasks to a score of 3 or higher, demonstrating average to above average performance, as measured by data collection and teacher observations by the end of the IEP.

Benchmarks/Short Term Instructional Objectives	Anticipated Beginning Date	Method of Evaluation
When given a written or verbal assignment, Kevin will increase his time on task to _____ minutes, within 4 of 5 trials with 80% accuracy as measured by data collections and teacher observations each nine weeks.	10/18/2021	Teacher Observations Data Collection
When given a written or verbal assignment, Kevin will attempt to begin an assignment without teacher reassurance within 4 of 5 trials with 80% accuracy as measured by teacher observations and data collection.	10/18/2021	Teacher Observations Data Collection

Program Modifications/Supports for School Personnel:
Prevocational Skills Checklist

Goal 2 of 7

Area of Need: Academics-Basic Reading Skills

Personnel/Position Responsible: Special Education Teacher

Annual Goal: When presented with text, Kevin will increase his basic reading skills in the areas of phonics, decoding, and word recognition from a KK to a 1.0 grade equivalence as measured by work samples, data collection, and district assessments by the end of the IEP.

Student Name: Kevin Bardwell
DOB: 11/05/2012

Shelby County School District
IEP Meeting Date: 10/18/2021

Benchmarks/Short-Term Instructional Objectives	Anticipated Beginning Date	Method of Evaluation
When shown word lists and/or a short passage, Kevin will demonstrate awareness of letter/sound relationships within 4 of 5 trials with 80% accuracy as measured by work samples and data collection by the end of each 9 weeks.	10/18/2021	Data Collection Work Samples
When shown word lists and/or a familiar text, Kevin will locate specific word patterns and sight words within 4 of 5 trials with 80% accuracy as measured by work samples and data collection by the end of each 9 weeks.	10/18/2021	Data Collection Work Samples

Program Modifications/Supports for School Personnel:
District pacing guides for assistance with curriculum modifications

Goal 3 of 7

Area of Need: Academics-Math Calculation

Personnel/Position Responsible: Special Education Teacher

Annual Goal: Using manipulatives, drawings, and various strategies, Kevin will increase his ability to identify numbers and solve math calculations to increase his level of performance from a <K.0 grade equivalence to a K.0 grade equivalence as measured by work samples, data collection, teacher observations and formal assessments by the end of the IEP.

Benchmarks/Short-Term Instructional Objectives	Anticipated Beginning Date	Method of Evaluation
When shown a set of numbers, Kevin will identify his numbers up to 20 within 8 out of 10 trials with 80% accuracy as measured by work samples, data collection, teacher observations and informal assessments each nine weeks.	10/18/2021	Standard Tests Teacher Observations Data Collection Work Samples
When given a set of manipulatives, Kevin to add and subtract single-digit numbers within 8 out of 10 trials with 80% accuracy as measured by work samples, data collection, teacher observations and informal assessments each nine weeks.	10/18/2021	Standard Tests Teacher Observations Data Collection Work Samples

Program Modifications/Supports for School Personnel:
District pacing guides for assistance with curriculum modifications

Student Name: Kevin Bardwell
DOB: 11/05/2012

Shelby County School District
IEP Meeting Date: 10/18/2021

Goal 4 of 7

Area of Need: Language

Personnel/Position Responsible: SLP

Annual Goal: Given multi-modal prompts, Kevin will label and identify common objects with increasing complexity relating to home, school, and community settings with 80% accuracy given 4/5 opportunities across 3 consecutive sessions as measured by SLP data by the end of the IEP period.

Benchmarks/Short-Term Instructional Objectives	Anticipated Beginning Date	Method of Evaluation
Given pictures, Kevin will name and identify objects related to home with 60% accuracy given 4/5 opportunities across 3 consecutive sessions as measured by SLP data.	10/18/2021	Data Collection Progress Monitoring
Given pictures, Kevin will name and identify objects related to school with 60% accuracy given 4/5 opportunities across 3 consecutive sessions as measured by SLP data.	10/18/2021	Data Collection Progress Monitoring
Given pictures, Kevin will name and identify objects related to community settings with 60% accuracy given 4/5 opportunities across 3 consecutive sessions as measured by SLP data.	10/18/2021	Data Collection Progress Monitoring

Program Modifications/Supports for School Personnel:

Data collection and observations

Goal 5 of 7

Area of Need: Language

Personnel/Position Responsible: SLP

Annual Goal: Given multi-modal prompts, Kevin will label actions expanding into 2-3 word utterance combinations with 80% accuracy given 4/5 opportunities across 3 consecutive sessions as measured by SLP data by the end of the IEP period.

Benchmarks/Short-Term Instructional Objectives	Anticipated Beginning Date	Method of Evaluation
Given pictures, Kevin will name 10 actions or "ing" cards with 80% accuracy given 4/5 opportunities across 3 consecutive sessions as measured by SLP data.	10/18/2021	Data Collection Progress Monitoring
Given pictures, Kevin will use nouns + actions or "ing" with 60% accuracy given 4/5 opportunities across 3 consecutive sessions as measured by SLP data.	10/18/2021	Data Collection Progress Monitoring
Given pictures, Kevin will use noun + actions + noun with 60% accuracy given 4/5 opportunities across 3 consecutive sessions as measured by SLP data.	10/18/2021	Data Collection Progress Monitoring

Student Name: Kevin Bardwell
DOB: 11/05/2012

Shelby County School District
IEP Meeting Date: 10/18/2021

Program Modifications/Supports for School Personnel:
Data collection and observations

Goal 6 of 7

Area of Need: Language

Personnel/Position Responsible: SLP

Annual Goal: Given multi-modal prompts, Kevin will follow spatial directions with 80% accuracy given 4/5 opportunities across 3 consecutive sessions as measured by SLP data by the end of the IEP period.

Benchmarks/Short-Term Instructional Objectives	Anticipated Beginning Date	Method of Evaluation
Given verbal or visual prompts, Kevin will follow 1 step directions with 80% accuracy given 4/5 opportunities across 3 consecutive sessions as measured by SLP data.	10/18/2021	Data Collection Progress Monitoring
Given verbal or visual prompts, Kevin will follow 2 step positional directions with 70% accuracy given 4/5 opportunities across 3 consecutive sessions as measured by SLP data.	10/18/2021	Data Collection Progress Monitoring

Program Modifications/Supports for School Personnel:
Data collection and observations

Goal 7 of 7

Area of Need: Language

Personnel/Position Responsible: SLP

Annual Goal: Given multi-modal prompts, Kevin will use total communication to effectively communicate wants and needs with 80% accuracy given 4/5 opportunities across 3 consecutive sessions as measured by SLP data by the end of the IEP period.

Benchmarks/Short-Term Instructional Objectives	Anticipated Beginning Date	Method of Evaluation
Given verbal, visual, and tactile cues, Kevin will use 5 functional signs with 50% accuracy given 4/5 opportunities across 3 consecutive sessions as measured by SLP data.	10/18/2021	Data Collection Progress Monitoring
Given verbal and visual cues, Kevin will use picture exchange to select activity of choice given 4/5 opportunities across 3 consecutive sessions as measured by SLP data.	10/18/2021	Data Collection Progress Monitoring

KB v. SCBE Due Process
SCS 000185

Student Name: Kevin Bardwell
 DOB: 11/05/2012

Shelby County School District
 IEP Meeting Date: 10/18/2021

Program Modifications/Supports for School Personnel:
 Data collection and observations

Benchmark/Short-Term Instructional Objectives above may contain the following codes after some or all of the benchmark/objective statements: Introduced (I), Developing (D), State CRT and Writing Assessed (A), and Mastered and Maintained (M). These codes indicate how the objective is being used in the general education curriculum and for TCAP testing at the specified grade level from which the objective is selected.

Supplementary Aids/Services and Support for the child:
 NA

KB v. SCBE Due Process
 SCS 000186

Student Name: Kevin Bardwell
DOB: 11/05/2012

Shelby County School District
IEP Meeting Date: 10/18/2021

Program Participation

a. Reading

Accommodations

Modifications

- | | |
|--|--|
| <ul style="list-style-type: none"> • Assignments - Give directions in alternative format (written/picture/verbal, etc.). • Assignments - Give directions in small, distinct steps. • Environmental Arrangements - Planned/preferential seating: In an area that is not distracting to the student(for example, close to windows • Environmental Arrangements - Reduce/minimize distractions (visual, auditory, tactile, movement, and/or social). • Pacing - Allow breaks. • Testing - Oral testing for directions and/or test items. • Testing - Extended Time (___ Minutes of Extended Time): Time and a half • Assignments - Additional Time: 30 minutes • Assignments - Speech to Text | <ul style="list-style-type: none"> • Content - Modified content |
|--|--|

b. English/Language Arts

Accommodations

Modifications

KB v. SCBE Due Process
SCS 000187

Student Name: Kevin Bardwell
DOB: 11/05/2012

Shelby County School District
IEP Meeting Date: 10/18/2021

KB v. SCBE Due Process
SCS 000188

- | | |
|--|--|
| <ul style="list-style-type: none"> • Assignments - Give directions in alternative format (written/pict e/verbal, etc.). • Assignments - Give directions in small, distinct steps. • Environmental Arrangements - Planned/preferential seating.: In an area that is not distracting to the student(for example, close to windows • Environmental Arrangements - Reduce/minimize distractions (visual, auditory, tactile, movement, and/or social). • Pacing - Allow breaks. • Testing - Oral testing for directions and/or test items, • Testing - Extended Time (___ Minutes of Extended Time): Time and a half • Assignments - Additional Time: 30 minutes • Assignments - Speech to Text | <ul style="list-style-type: none"> • Content - Modified content |
|--|--|

c. Spelling

Accommodations

Modifications

- | | |
|--|--|
| <ul style="list-style-type: none"> • Assignments - Give directions in alternative format (written/pict e/verbal, etc.). • Assignments - Give directions in small, distinct steps. • Environmental Arrangements - Planned/preferential seating.: In an area that is not distracting to the student(for example, close to windows • Environmental Arrangements - Reduce/minimize distractions (visual, auditory, tactile, movement, and/or social). • Pacing - Allow breaks. • Testing - Oral testing for directions and/or test items, • Testing - Extended Time (___ Minutes of Extended Time): Time and a half • Assignments - Additional Time: 30 minutes • Assignments - Speech to Text | <ul style="list-style-type: none"> • Content - Modified content |
|--|--|

d. Writing

Student Name: Kevin Bardwell
DOB: 11/05/2012

Shelby County School District
IEP Meeting Date: 10/18/2021

Accommodations	Modifications
<ul style="list-style-type: none"> • Assignments - Give directions in alternative format (written/pict re/verbal, etc.). • Assignments - Give directions in small, distinct steps. • Environmental Arrangements - Planned/preferential seating.: In an area that is not distracting to the student(for example, close to windows • Environmental Arrangements - Reduce/minimize distractions (visual, auditory, tactile, movement, and/or social). • Pacing - Allow breaks. • Testing - Oral testing for directions and/or test items, • Testing - Extended Time (___ Minutes of Extended Time): Time and a half • Assignments - Additional Time: 30 minutes • Assignments - Speech to Text 	<ul style="list-style-type: none"> • Content - Modified content

e. Math

Accommodations	Modifications
<ul style="list-style-type: none"> • Assignments - Give directions in alternative format (written/pict re/verbal, etc.). • Assignments - Give directions in small, distinct steps. • Environmental Arrangements - Planned/preferential seating.: In an area that is not distracting to the student(for example, close to windows • Environmental Arrangements - Reduce/minimize distractions (visual, auditory, tactile, movement, and/or social). • Pacing - Allow breaks. • Testing - Oral testing for directions and/or test items, • Testing - Extended Time (___ Minutes of Extended Time): Time and a half • Assignments - Additional Time: 30 minutes • Materials - Visual Representations for Math • Assignments - Speech to Text 	<ul style="list-style-type: none"> • Content - Modified content

Student Name: Kevin Bardwell
DOB: 11/05/2012

Shelby County School District
IEP Meeting Date: 10/18/2021

f. Science

Accommodations	Modifications
<ul style="list-style-type: none"> • Assignments - Give directions in alternative format (written/picture/verbal, etc.). • Assignments - Give directions in small, distinct steps. • Environmental Arrangements - Planned/preferential seating.: In an area that is not distracting to the student(for example, close to windows • Environmental Arrangements - Reduce/minimize distractions (visual, auditory, tactile, movement, and/or social). • Pacing - Allow breaks. • Testing - Oral testing for directions and/or test items, • Testing - Extended Time (___ Minutes of Extended Time): Time and a half • Assignments - Additional Time: 30 minutes • Assignments - Speech to Text. 	<ul style="list-style-type: none"> • Content - Modified content

KB v. SCBE Due Process
SCS 000190

g. Social Studies

Accommodations	Modifications
<ul style="list-style-type: none"> • Assignments - Give directions in alternative format (written/picture/verbal, etc.). • Assignments - Give directions in small, distinct steps. • Environmental Arrangements - Planned/preferential seating.: In an area that is not distracting to the student(for example, close to windows • Environmental Arrangements - Reduce/minimize distractions (visual, auditory, tactile, movement, and/or social). • Pacing - Allow breaks. • Testing - Oral testing for directions and/or test items, • Testing - Extended Time (___ Minutes of Extended Time): Time and a half • Assignments - Additional Time: 30 minutes • Assignments - Speech to Text 	<ul style="list-style-type: none"> • Content - Modified content

Student Name: Kevin Bardwell

DOB: 11/05/2012

Shelby County School District

IEP Meeting Date: 10/18/2021

State/District Mandated Tests

☐ Student will participate in the following state/district mandated assessment(s):

☐ Achievement

☐ EOC

☒ Tennessee Alternate Assessment

☐ WIDA Access

☐ WIDA Access (Alternate)

☐ ACT

☐ EXPLORE

☐ PLAN

District Assessment:

☐ No Accommodations

☐ Accommodations
KB v. SCBE Due Process
SCS 000181

Student Name: Kevin Bardwell
DOB: 11/05/2012

Shelby County School District
IEP Meeting Date: 10/18/2021

Special Education and Related Services

Direct Special Education

Type of Service	Provider Title	Sessions Per	Time Per Session	Hours Per Week	Beginning-Ending Dates	Location of Services
Functional Skills	Special Education Teacher	5 Per week	6.75 hr	33 hrs and 45 mins	10/18/2021-08/22/2022	Special Ed Setting

Related Service(s), including Instruction from Specialized Personnel

Type of Service	Provider Title	Sessions Per	Time Per Session	Hours Per Week	Beginning-Ending Dates	Location of Services
Language Therapy	Speech Language Pathologist	8 Per month	30 min	1 hrs and 0 mins	10/18/2021-08/22/2022	Special Ed Setting

Total Special Ed Minutes by Date Range		
Begin Date	End Date	Minutes per Week
10/18/2021	08/22/2022	2085

Note: Service Dates apply during the normal school year, not ESY, unless specified.

KB v. SCBE Due Process
SCS 000192

Student Name: Kevin Bardwell

DOB: 11/05/2012

Shelby County School District

IEP Meeting Date: 10/18/2021

LR and General Education

Explain the extent, if any, in which the student **will not** participate with non-disabled peers in:

1. the regular class: Kevin will not participate with his non-disabled peers when he is receiving instruction in the Functional Skill classroom 33.75 hours a week and when he is receiving Language Therapy 8 times per month with 30 minute sessions.
2. extracurricular and nonacademic activities: Kevin will participate with non-disabled peers in extracurricular and nonacademic activities to the same extent as his non-disabled peers.
3. and/or, his/her LEA Home School: Services will be provided at his LEA home school

Special Transportation

No Special Transportation.

Extended School Year

The IEP Team will determine if Extended School Year (ESY) is required by 04/15/2022.

Basis for Determining ESY Eligibility. The IEP team determined that more data is needed in order to determine if ESY services are necessary.

 KB v. SCBE Due Process
SCS 000193

Student Name: Kevin Bardwell
DOB: 11/05/2012

Shelby County School District

IEP Meeting Date: 10/18/2021

IEP Participants

EASY FAX



7/- .0049398C

The following individuals attended the IEP Team and participated in the development of this Individualized Education Program.

Position	Signature	In Agreement	Date
Kevin Bardwell Parent		<input type="checkbox"/> Yes <input type="checkbox"/> No	
LEA Representative		<input type="checkbox"/> Yes <input type="checkbox"/> No	
Regular Education Teacher		<input type="checkbox"/> Yes <input type="checkbox"/> No	
Special Education Teacher		<input type="checkbox"/> Yes <input type="checkbox"/> No	
Interpreter of Evaluation Results		<input type="checkbox"/> Yes <input type="checkbox"/> No	
Student		<input type="checkbox"/> Yes <input type="checkbox"/> No	
SLP - Shavonica Williams		<input type="checkbox"/> Yes <input type="checkbox"/> No	
SPED Advisor - Nia Coleman		<input type="checkbox"/> Yes <input type="checkbox"/> No	
-		<input type="checkbox"/> Yes <input type="checkbox"/> No	

Student Name: Kevin Bardwell
DOB: 11/05/2012

Shelby County School District
IEP Meeting Date: 10/18/2021

:-		<input type="checkbox"/> Yes <input type="checkbox"/> No	
:-		<input type="checkbox"/> Yes <input type="checkbox"/> No	

KB v. SCBE Due Process
SCS 000195

Student Name: Kevin Bardwell
DOB: 11/05/2012

Shelby County School District
IEP Meeting Date: 10/18/2021

Informed Parental Consent

Please select 'Yes' or 'No' for each statement below:

- ☐ Yes ☐ No I certify that I am the legal parent(s)/guardian(s)/surrogate(s) of this child.
- ☐ Yes ☐ No I have been informed of and understand my rights as a parent, and have received a copy of the notice of procedural safeguards.
- ☐ Yes ☐ No I have been involved in the IEP Team meeting and/or the development of this IEP, and give permission for the proposed program described in this IEP for my child.
- ☐ Yes ☐ No My child and I have been informed of his/her right to represent himself/herself upon his/her eighteenth birthday. (Note: This information must be provided beginning at least one year prior to the student's 18th birthday.)
- ☐ Yes ☐ No I understand that participation in the alternate assessment means my student is participating in a curriculum that may **hinder his/her ability to obtain a regular diploma**. I understand that my child **may instead receive** an alternate academic diploma, occupational diploma, and/or special education diploma.

Please select one of the following options:

- ☐ A draft IEP was developed and a copy was provided at least 48 hours prior to my child's IEP team meeting.
- ☐ A draft IEP was developed, but a copy was not provided at least 48 hours prior to my child's IEP team meeting.
- ☐ A draft IEP was developed, but a copy was declined.
- ☐ A draft IEP was not developed prior to the IEP team meeting.

Parent/Guardian/Surrogate Signature

Date

Student Signature

Date

Date IEP was given to parent(s): _____

If the parent(s) did not attend, the person responsible for forwarding and explaining the contents of the IEP to the parents along with their rights is: Cynthia Houston

Documentation of IEP Review by Other Teachers not in Attendance:

Student Name: Kevin Bardwell
DOB: 11/05/2012

Shelby County School District
IEP Meeting Date: 10/18/2021

Signature _____

Date _____

Signature _____

Date _____

Signature _____

Date _____

Signature _____

Date _____

Signature _____

Date _____

Signature _____

Date _____

KB v. SCBE Due Process
SCS 000197

Student Name: Kevin Bardwell
DOB: 11/05/2012

Shelby County School District
IEP Meeting Date: 10/18/2021

TENNESSEE ALTERNATE ASSESSMENTS

Participation Decision Documentation

To meet the criteria for the Tennessee Alternate Assessment, the student must meet all eligibility criteria descriptors.

Participation Criteria	Participation Criteria Descriptors	Sources of Evidence
1. The student has a significant cognitive disability. Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Review of student records indicate a disability or multiple disabilities that significantly impact intellectual functioning and adaptive behavior. * Adaptive behavior is defined as essential for someone to live independently and to function safely in daily life.	<input checked="" type="checkbox"/> Results of Individual Cognitive Ability Test <input checked="" type="checkbox"/> Results of Adaptive Behavior Skills Assessment <input type="checkbox"/> Results of individual and group administered achievement tests <input checked="" type="checkbox"/> Results of informal assessment <input type="checkbox"/> Results of individual reading assessments <input type="checkbox"/> Results of district-wide alternate assessments <input type="checkbox"/> Results of language assessments including English language learner (ELL) language assessment if applicable
2. The student is learning content linked to (derived from) the state content standards. Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Goals and instruction listed in the IEP for this student are linked to the enrolled grade-level standards and address knowledge and skills that are appropriate and challenging for this student.	<input checked="" type="checkbox"/> Examples of curriculum, instructional objectives and materials including work samples <input checked="" type="checkbox"/> Present levels of academic and functional performance, goals and objectives from the IEP <input checked="" type="checkbox"/> Data from scientific research-based interventions <input checked="" type="checkbox"/> Progress monitoring data

KB v. SCBE Due Process
SCS 000198

Student Name: Kevin Bardwell
DOB: 11/05/2012

Shelby County School District
IEP Meeting Date: 10/18/2021

<p>3. The student requires extensive direct individualized instruction and substantial supports to achieve measureable gains in the grade-appropriate curriculum. Yes <input checked="" type="checkbox"/> No <input type="checkbox"/></p>	<p>The student (a) requires extensive, repeated, individualized instruction and support that is not of a temporary or transient nature and (b) uses substantially adapted materials and individualized methods of accessing information in alternative ways to acquire, maintain, generalize, demonstrate and transfer skills across academic content.</p>	<p><input checked="" type="checkbox"/> Examples of curriculum, instructional objectives, and materials including work samples from both school and community based instruction</p> <p><input checked="" type="checkbox"/> Teacher collected data and checklists</p> <p><input type="checkbox"/> Present levels of academic and functional performance, goals, and objectives, and post school outcomes from the IEP and the Transition Plan for students age 14 and older</p>
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KB v. SCBE Due Process
SCS 000199

Student Name: Kevin Bardwell
DOB: 11/05/2012

Shelby County School District
IEP Meeting Date: 10/18/2021

The student is eligible to participate in the Tennessee Alternate Assessment if all responses above are marked Yes.

Additional Considerations	Not to Use in Reviewing Evidence
1. A disability category or label	
2. Poor attendance or extended absences	
3. Native language/social/cultural or economic difference	
4. Expected poor performance on the general education assessment	
5. Academic and other services received	
6. Educational environment or instructional setting	
7. Percent of time receiving special education	
8. English Language Learner (ELL) status	
9. Low reading level/achievement level	
10. Anticipated disruptive behavior	
11. Impact of test scores on accountability system	
12. Administrator decision	
13. Anticipated emotional duress	
14. Need for accommodations, e.g., assistive technology/AAC to participate in assessment process.	
Based on consideration of the student's eligibility, the IEP team has determined that the alternate assessment is the most appropriate assessment for this student AND evidence shows that the decision for participating in the Tennessee Alternate Assessment was not based on the above list of Exclusionary factors. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

KB v. SCBE Due Process
SCS 000200

Student Name: Kevin Bardwell

DOB: 11/05/2012

Shelby County School District

IEP Meeting Date: 10/18/2021

The IEP team has considered multiple sources of information and data showing that the student 1) demonstrates a significant cognitive disability; 2) is participating in instruction linked to the Tennessee state standard; and 3) requires extensive, direct individualized instruction and substantial supports.

The IEP team has decided that the student cannot participate in the regular assessment (even with the use of accommodations) and that the alternate assessment is appropriate for the student.

Given the data, the IEP team has decided that the student ___will/___will not participate in the alternate assessment.

Name	Position	Date

Parent(s)/Guardian	Date

KB v. SCBE Due Process
SCS 000201

Student Name: Kevin Bardwell

DOB: 11/05/2012

Shelby County School District

IEP Meeting Date: 10/18/2021

IEP Participants

EASY FAX



7/- .0049398C

The following individuals attended the IEP Team and participated in the development of this Individualized Education Program.

Position	Signature	In Agreement	Date
Kevin Bardwell Parent		<input type="checkbox"/> Yes <input type="checkbox"/> No	10-18-21
LEA Representative		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	10/18/21
Regular Education Teacher		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	10/18/21
Special Education Teacher		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	10/18/2021
Interpreter of Evaluation - Results		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	10/18/2021
SLP - Shavonica Williams		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	10/18/2021
SPED Advisor - Nia Coleman		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	10/18/2021
-		<input type="checkbox"/> Yes <input type="checkbox"/> No	
-		<input type="checkbox"/> Yes <input type="checkbox"/> No	

Student Name: Kevin Bardwell

DOB: 11/05/2012

Shelby County School District

IEP Meeting Date: 10/18/2021

Informed Parental Consent

Please select 'Yes' or 'No' for each statement below:

- ☒ Yes ☐ No I certify that I am the legal parent(s)/guardian(s)/surrogate(s) of this child.
- ☒ Yes ☐ No I have been informed of and understand my rights as a parent, and have received a copy of the notice of procedural safeguards.
- ☒ Yes ☐ No I have been involved in the IEP Team meeting and/or the development of this IEP, and give permission for the proposed program described in this IEP for my child.
- ☒ Yes ☐ No My child and I have been informed of his/her right to represent himself/herself upon his/her eighteenth birthday. (Note: This information must be provided beginning at least one year prior to the student's 18th birthday.)
- ☒ Yes ☐ No I understand that participation in the alternate assessment means my student is participating in a curriculum that **may** hinder his/her ability to obtain a regular diploma. I understand that my child **may instead receive** an alternate academic diploma, occupational diploma, and/or special education diploma.

Please select one of the following options:

- ☒ A draft IEP was developed and a copy was provided at least 48 hours prior to my child's IEP team meeting.
- ☐ A draft IEP was developed, but a copy was not provided at least 48 hours prior to my child's IEP team meeting.
- ☐ A draft IEP was developed, but a copy was declined.
- ☐ A draft IEP was not developed prior to the IEP team meeting.

Kevin Bardwell
Parent/Guardian/Surrogate Signature

10-18-21
Date

Student Signature

Date

Date IEP was given to parent(s): 11/30/2021

If the parent(s) did not attend, the person responsible for forwarding and explaining the contents of the IEP to the parents along with their rights is: Cynthia Houston

Documentation of IEP Review by Other Teachers not in Attendance:

Student Name: Kevin Bardwell
DOB: 11/05/2012

Shelby County School District
IEP Meeting Date: 10/18/2021

The IEP team has considered multiple sources of information and data showing that the student 1) demonstrates a significant cognitive disability; 2) is participating in instruction linked to the Tennessee state standards; and 3) requires extensive, direct, individualized instruction and substantial supports.

The IEP team has decided that the student cannot participate in the regular assessment (even with the use of accommodations) and that the alternate assessment is appropriate for the student.

Given the data, the IEP team has decided that the student ☒ will/ ☐ will not participate in the alternate assessment.

Name	Position	Date
William E. Grant	School Psychologist	10/18/2021
Cynthia Henderson	Instructional Resource Teacher	10/18/2021
Rufus	Principal	10/18/21
Margaret	General Teacher	10/18/21
Sharon	Speech-Language Pathologist	10/18/21

Parent(s)/Guardian	Date
Kellie B. Bell	10-18-21

KB v. SCBE Due Process
SCS 000204

Attach Documentation for each disability to Eligibility Report OR Include in Written Report.

Eligibility Report - Eligible

Name: Kevin Bardwell DOB: 11/05/2012 Grade: 3rd Grade School: Lucile E. Campbell Elementary
School System: Shelby County School District
Eligibility Determination Date: 10/18/2021 Projected Reevaluation Eligibility Date: 10/18/2024

1. Based on information from a variety of sources that have been documented and carefully considered, the IEP team has determined:

☒ Yes ☐ No - This student meets the criteria for a disability consistent with Tennessee State Regulations.

☒ Yes ☐ No - The disability adversely impacts educational performance in his/her learning environment.

Both **MUST** be YES in order for the student to be eligible for special education and related services.

2. The following factors have been ruled out as a primary cause of the student's educational difficulties:

☒ Yes ☐ No Lack of instruction in reading or mathematics ☒ Yes ☐ No Limited English proficiency

3. Educationally relevant medical findings, if any: None

4. Vision Screening Results: Passed Date: 07/26/2021 Hearing Screening Results: Passed Date: 07/26/2021

5. ☒ Evaluation results are documented and the student's disability determination documentation is attached.

ASSESSMENT TEAM

Your signature indicates that you were involved in the assessment by providing evaluation, observations, or input. Dissenting statements should be attached.

Position	Signature	Date	Agree	Disagree
Parent	<i>Kevin Bardwell</i>	10-18-21	<input checked="" type="checkbox"/>	<input type="checkbox"/>
General Education Teacher	<i>Maria Allen</i>	10-18-21	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Interpreter of Test Results	<i>William E. Gars</i>	10-18-21	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Assessment Specialist	<i>William E. Gars</i>	10-18-21	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Special Education Teacher			<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>

ELIGIBILITY DETERMINATION

☒ This student IS ELIGIBLE FOR SPECIAL EDUCATION because s/he meets the State of Tennessee's eligibility standards for Autism (Primary) / Intellectual Disability (Secondary)

☐ This student Is Eligible for Special Education because s/he meets the State of Tennessee's eligibility standards for Autism (Primary) / Intellectual Disability (Secondary) the student's parent/guardian is declining services. This student will not receive special education or related services.

☐ This student Is Not Eligible for Special Education because s/he does not meet standards for a disability.

Position	Signature	Date	Agree	Disagree
Parent	<i>Kevin Bardwell</i>	10-18-21	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Parent (step)	<i>Stephanie</i>	10/18/21	<input checked="" type="checkbox"/>	<input type="checkbox"/>
LEA Representative	<i>William E. Gars</i>	10-18-21	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Special Education Teacher	<i>William E. Gars</i>	10-18-21	<input checked="" type="checkbox"/>	<input type="checkbox"/>
General Education Teacher	<i>Maria Allen</i>	10-18-21	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Interpreter of Test Results	<i>William E. Gars</i>	10-18-21	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Special Education Advisor	<i>William E. Gars</i>	10/18/21	<input checked="" type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>

☒ I received a copy of my child's evaluation report(s) utilized in determining eligibility and/or education program.

☐ I did not receive a copy of my child's evaluation report(s) Explanation:

Parent/Guardian Signature *Kevin Bardwell*

Date: 10-18-21

Date Eligibility Report was given to parent(s): 10/18/2021

If the parent(s) did not attend, the person responsible for forwarding and explaining the Eligibility Report to the parents along with their rights is:

EASYFAX



7/-, 004940DC

ED-3057 - Rev 02/11
Department of Education

Eligibility Report
EF#- 1-888-287-3034

We agree as to eligibility but reserve the right to challenge the evaluation and request an independent educational evaluation.

DocuSign Envelope ID: 4243B6C8-386A-4368-BA4F-0B03C815A9D8 / to Eligibility Report OR include in written report.

Eligibility Report - Out of State Transfer

Name: Kevin Bardwell DOB: 11/05/2012 Grade: 3rd Grade School: Lucie E. Campbell Elementary
 School System: Shelby County School District
 Eligibility Determination Date: 08/16/2021 Projected Reevaluation Eligibility Date: 10/15/2021

ASSESSMENT TEAM

Your signature indicates that you were involved in the assessment by providing evaluation, observations, or input. Dissenting statements should be attached.

Position	Signature	Date	Agree	Disagree
Parent	<u>Kevin Bardwell</u>	8-16-21	<input checked="" type="checkbox"/>	<input type="checkbox"/>
General Education Teacher	<u>[Signature]</u>	8-16-21	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Interpreter of Test Results	<u>William E. Graves</u>	8-16-21	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Assessment Specialist	<u>William E. Graves</u>	8-16-21	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Special Education Teacher	<u>Cynthia Houston</u>	8-16-20	<input checked="" type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>

ELIGIBILITY DETERMINATION

- ☒ This student is being made eligible so that comparable services can be provided; however, additional data is needed to establish the student's eligibility for special education services pursuant to the disability standards outlined by the state of Tennessee. This student was certified in the former state for **Developmental Delay (Primary)** / _____ (Secondary)
- ☐ This student **IS ELIGIBLE FOR SPECIAL EDUCATION** because s/he meets the State of Tennessee's eligibility standards for **Developmental Delay (Primary)** / _____ (Secondary)
- ☐ This student **Is Eligible for Special Education** because s/he meets the State of Tennessee's eligibility standards for **Developmental Delay (Primary)** / _____ (Secondary); however, the student's parent/guardian is declining services. This student will not receive special education or related services.
- ☐ This student **Is Not Eligible for Special Education** because s/he does not meet standards for a disability.

Position	Signature	Date	Agree	Disagree
Parent	<u>Kevin Bardwell</u>	8-16-21	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Parent			<input type="checkbox"/>	<input type="checkbox"/>
LEA Representative	<u>Alan Coleman</u>	8-16-21	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Special Education Teacher	<u>Cynthia Houston</u>	8-16-21	<input checked="" type="checkbox"/>	<input type="checkbox"/>
General Education Teacher	<u>[Signature]</u>	8-16-21	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Interpreter of Test Results	<u>William E. Graves</u>	8-16-21	<input checked="" type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>

- ☒ I received a copy of my child's evaluation report(s) utilized in determining eligibility and/or education program.
- ☐ I did not receive a copy of my child's evaluation report(s). Explanation:

Parent/Guardian Signature Kevin Bardwell Date: 8-16-21

Date Eligibility Report was given to parent(s): 08/16/2021

If the parent(s) did not attend, the person responsible for forwarding and explaining the Eligibility Report to the parents along with their rights is: Cynthia Houston

EASYFAX



77-0047BCD7

ED-3057 - Rev 02/11
 Department of Education

Eligibility Report
 EF#- 1-888-287-3034



Shelby County School District
160 S. Hollywood Street
Memphis, TN 38112

Individual Education Program (IEP)

From: 01/07/2022 To: 08/22/2022

☐ Annual

☒ Addendum

Student Information

Student: Kevin Bardwell **Birthdate:** 11/05/2012 **Grade:** 3rd Grade
(first) (last)
State ID: 5132885 **Student ID:** 493904 **Gender:** M **Hispanic Ethnicity:** No
Race: Black or African American

School: Lucie E. Campbell Elementary

District: Shelby County School District

Primary Disability:	Autism	Re-evaluation of Eligibility Date:	10/18/2024
Secondary Disability:	Intellectual Disability		

Medical Information: Previous data shows that he is a student diagnosed with Autism Spectrum disorder.

Relationship to Student: Both Parents /Guardian

Name: Eboni Guy

Home Phone: 901-501-8993

Address: 2404 Whitney Ave, Memphis TN, 38127-8302

Cell Phone: 901-501-8993

Relationship to Student: Father /Guardian

Name: Kevin Bardwell

Home Phone: 901-491-0417

Address: 2404 Whitney Ave, Memphis TN, 38127-8302

Cell Phone: 901-491-0417

Student Name: Kevin Bardwell
DOB: 11/05/2012

Shelby County School District
IEP Meeting Date: 01/07/2022

Current Descriptive Information

Describe the student's strengths

Kevin is polite, he treats adults/peers and their belongings with respect. He has appropriate attendance. Kevin seems to prefer math over reading.

Describe the concerns of the parents regarding their student's education

Parents are concerned about Kevin's speech and academics. They feel that Kevin doesn't have the math and reading skills to be successful in the regular educational setting..

Describe how the student's disability adversely impacts his/her access to participation in the general curriculum:

Kevin meets the state of Tennessee eligibility standards to be identified as a student with Autism and an Intellectual Disability. Due to his disabilities, Kevin has difficulty communicating and relating to others in a socially appropriate manner. He also exhibits significantly impaired intellectual functioning and adaptive functioning. The characteristics of the disability adversely impact the student's rate of academic progress in the general education curriculum.

Consideration of Special Factors for IEP Development

Does the student have limited English proficiency? No

If yes, what is his/her primary mode of language? English

Is the student blind or visually impaired? No

If yes, does the student need instruction in Braille? NA

Does the student have communication needs? Yes

If there are communication needs, does the student have a consistent, reliable, and effective mode of communication? Yes

If the student does not have a consistent, reliable, and effective mode of communication, in what ways does the student respond and engage with their environment?

N/A

Is the student deaf or hard of hearing? No

If yes, did the IEP Team consider:

- a. the student's language and communication needs; N/A
- b. opportunities for direct communications with peers and professional personnel in the student's language and communication mode; N/A
- c. necessary opportunities for direct instruction in the student's language and communication mode? N/A

Is an assistive technology device or service necessary in order to implement the student's IEP? No

If yes, how will AT be addressed in the student's programming?

Student Name: Kevin Bardwell
DOB: 11/05/2012

Shelby County School District
IEP Meeting Date: 01/07/2022

- ☐ Accommodations ☐ Supplemental Aids and Services (Note: Please ensure any AT equipment/devices and services are added as a Supplemental Aid in the Services and Supplemental Aids section within the IEP Process) ☐ Goals and Objectives
- ☐ Related Services ☐ Other: NA

Does the student's behavior impede his/her learning or that of others? No
If yes, the IEP Team has addressed the student's behavior in the following way(s):

- ☐ Functional Behavior Assessment ☐ Behavior Intervention Plan ☐ Accommodations
- ☐ Goals and Objectives ☐ Other (write in): NA

Does the student demonstrate cognitive processing deficits that impact his/her classroom performance and warrant consideration in the development of the IEP (i.e. accommodation use)? Yes

If you chose "Yes," please explain: Comprehensive data shows evidence of significantly impaired intellectual functioning. Impaired intellectual functioning can impair the ability to complete tests and assignments within usual time frames. Additional time may be needed on such tasks.

Present Levels of Performance

Levels of functioning, should when applicable, include norm referenced and/or criterion referenced data, as well as descriptive information of the student's deficit areas.

Assessment Area: PL-Academics-Basic Reading Skills

EXCEPTIONAL? Yes

Present Level of Performance: According to the results of the I-Ready reading Diagnostic, Kevin recognizes and name all uppercase letters of the alphabet, is in the early stages of learning basic vocabulary words, and is in the early stages of learning high-frequency words. His Lexile reading measure is BR320L and his Lexile range is BR400L-BR270L. However, Kevin has not acquired fundamental decoding skills and needs instruction in Phonics. His score indicates that he has gaps in grade-level word knowledge.

Impact of Mastery of Standards: Kevin is in Tier III, and is performing significantly below his peers at the same grade level. This will have a negative impact on his mastery of grade level reading skills. He will need a human reader, accommodations and modifications to be successful in the general education setting.

Source of Information: I-Ready

SubTest: Reading

Date Administered: 08/20/2021

Grade Equiv. - KK

Percentile Rank - 1st

Std. Score - 306

Student Name: Kevin Bardwell
 DOB: 11/05/2012

Shelby County School District
 IEP Meeting Date: 01/07/2022

Assessment Area: PL-Academics-Math Calculation

EXCEPTIONAL? Yes

Present Level of Performance: According to the KTEA-3rd Edition, Kevin was able to point to the numbers "2" and "6". He was able to recognize a square and a triangle. However, Kevin was not able to do any simple addition or subtraction.

Impact of Mastery of Standards: Kevin is performing significantly below his peers in math and is in need of intensive intervention. This causes a negative impact on his mastery of grade level standards. Kevin will need accommodations and modifications.

Source of Information: Kaufman Test of Educational Achievement
 Third Edition

SubTest: Math Computation

Date Administered: 08/23/2021

Grade Equiv. - <K
 Score - 3

KB v. SCBE Due Process
 SCS 000255

Student Name: Kevin Bardwell

DOB: 11/05/2012

Shelby County School District

IEP Meeting Date: 01/07/2022

Assessment Area: PL-Language**EXCEPTIONAL?** Yes

Present Level of Performance: Kevin demonstrates severely restricted oral expressive and receptive language skills for a student of his age. He typically uses no spontaneous verbalizations during communicative exchange. Kevin is able to label or name common objects but struggles with using action concepts, demonstrating his understanding and use of location concepts. Kevin demonstrates the understanding and use of some basic concepts such as identifying colors and body parts. He also demonstrates strengths in his attention to task, sustained concentration and engagement, compliance with school rules, awareness and adherence to personal space. Kevin is able to demonstrate understanding of turn taking skills as well as use of eye contact. Kevin struggles to produce verbal utterances for the social purposes of language other than labelling or answering.

Impact of Mastery of Standards: Kevin's communication system is severely restricted and prevents him from demonstrating as well as verbalizing his mastery of age and grade level content.

Source of Information: Observation - Language

SubTest: General

Date Administered: 10/09/2021

Narrative - Kevin demonstrated many strengths as follows: his compliance with tasks, his ability to sustain attention within and across tasks, his positive response to simple one step verbal directions, his demonstration of understanding school rules, his ability to verbally label a variety of common objects, his production of speech with consistent good intelligibility and using a vocal volume sufficient to allow effective transmission of his message to others in the interaction, as well as to make and sustain eye contact throughout interactions.

KB v. SCBE Due Process
SCS 000256

Student Name: Kevin Bardwell

DOB: 11/05/2012

Shelby County School District

IEP Meeting Date: 01/07/2022

Assessment Area: PL-Pre-vocational**EXCEPTIONAL?** Yes

Present Level of Performance: Kevin is polite, he treats adults/peers and their belongings with respect. He has appropriate attendance, maintains proper dress code and has the ability to get along with peers. However, he struggles to work alone without redirection/reassurance, attempt/begin assignments, and stay on task until completion in assignments in a timely manner. He also struggles to control temper in all situations, follow written/spoken directions effectively and recite/write personal data.

Impact of Mastery of Standards: Kevin's prevocational skills compares poorly to peers compared to his age. These deficits make it difficult for him to master grade level standards.

Source of Information: Prevocational Skills Checklist

SubTest: Classroom Performance	Date Administered: 08/23/2021	Passed Y or N - N
SubTest: Behavior	Date Administered: 08/23/2021	Passed Y or N - N
SubTest: Cooperation	Date Administered: 08/23/2021	Passed Y or N - N
SubTest: Self Help	Date Administered: 08/23/2021	Passed Y or N - N

KB v. SCBE Due Process
SCS 000257

Student Name: Kevin Bardwell
DOB: 11/05/2012

Shelby County School District
IEP Meeting Date: 01/07/2022

Measurable Annual Goals and Benchmarks/Short-term Instructional Objectives for IEP and Transition Activities

Goal 1 of 7

Area of Need: Pre-vocational

Personnel/Position Responsible: SCS Personnel

Annual Goal: Given verbal prompts, Kevin will improve his performance of prevocational tasks to a score of 3 or higher, demonstrating average to above average performance, as measured by data collection and teacher observations by the end of the IEP.

Benchmarks/Short-Term Instructional Objectives	Anticipated Beginning Date	Method of Evaluation
When given a written or verbal assignment, Kevin will increase his time on task to ____ minutes, within 4 of 5 trials with 80% accuracy as measured by data collections and teacher observations each nine weeks.	10/18/2021	Teacher Observations Data Collection
When given a written or verbal assignment, Kevin will attempt to begin an assignment without teacher reassurance within 4 of 5 trials with 80% accuracy as measured by teacher observations and data collection.	10/18/2021	Teacher Observations Data Collection

Program Modifications/Supports for School Personnel:
Prevocational Skills Checklist

Goal 2 of 7

Area of Need: Academics-Basic Reading Skills

Personnel/Position Responsible: Special Education Teacher

Annual Goal: When presented with text, Kevin will increase his basic reading skills in the areas of phonics, decoding, and word recognition from a KK to a 1.0 grade equivalence as measured by work samples, data collection, and district assessments by the end of the IEP.

Student Name: Kevin Bardwell
DOB: 11/05/2012

Shelby County School District
IEP Meeting Date: 01/07/2022

Benchmarks/Short-Term Instructional Objectives	Anticipated Beginning Date	Method of Evaluation
When shown word lists and/or a short passage, Kevin will demonstrate awareness of letter/sound relationships within 4 of 5 trials with 80% accuracy as measured by work samples and data collection by the end of each 9 weeks.	10/18/2021	Data Collection Work Samples
When shown word lists and/or a familiar text, Kevin will locate specific word patterns and sight words within 4 of 5 trials with 80% accuracy as measured by work samples and data collection by the end of each 9 weeks.	10/18/2021	Data Collection Work Samples

Program Modifications/Supports for School Personnel:
District pacing guides for assistance with curriculum modifications

Goal 3 of 7

Area of Need: Academics-Math Calculation

Personnel/Position Responsible: Special Education Teacher

Annual Goal: Using manipulatives, drawings, and various strategies, Kevin will increase his ability to identify numbers and solve math calculations to increase his level of performance from a <K.0 grade equivalence to a K.0 grade equivalence as measured by work samples, data collection, teacher observations and formal assessments by the end of the IEP.

Benchmarks/Short-Term Instructional Objectives	Anticipated Beginning Date	Method of Evaluation
When shown a set of numbers, Kevin will identify his numbers up to 20 within 8 out of 10 trials with 80% accuracy as measured by work samples, data collection, teacher observations and informal assessments each nine weeks.	10/18/2021	Standard Tests Teacher Observations Data Collection Work Samples
When given a set of manipulatives, Kevin will add and subtract single-digit numbers within 8 out of 10 trials with 80% accuracy as measured by work samples, data collection, teacher observations and informal assessments each nine weeks.	10/18/2021	Standard Tests Teacher Observations Data Collection Work Samples

Program Modifications/Supports for School Personnel:
District pacing guides for assistance with curriculum modifications

Student Name: Kevin Bardwell

DOB: 11/05/2012

Shelby County School District

IEP Meeting Date: 01/07/2022

Goal 4 of 7

Area of Need: Language

Personnel/Position Responsible: SLP

Annual Goal: Given multi-modal prompts, Kevin will label and identify common objects with increasing complexity relating to home, school, and community settings with 80% accuracy given 4/5 opportunities across 3 consecutive sessions as measured by SLP data by the end of the IEP period.

Benchmarks/Short Term Instructional Objectives	Anticipated Beginning Date	Method of Evaluation
Given pictures, Kevin will name and identify objects related to home with 60% accuracy given 4/5 opportunities across 3 consecutive sessions as measured by SLP data.	10/18/2021	Data Collection Progress Monitoring
Given pictures, Kevin will name and identify objects related to school with 60% accuracy given 4/5 opportunities across 3 consecutive sessions as measured by SLP data.	10/18/2021	Data Collection Progress Monitoring
Given pictures, Kevin will name and identify objects related to community settings with 60% accuracy given 4/5 opportunities across 3 consecutive sessions as measured by SLP data.	10/18/2021	Data Collection Progress Monitoring

Program Modifications/Supports for School Personnel:

Data collection and observations

Goal 5 of 7

Area of Need: Language

Personnel/Position Responsible: SLP

Annual Goal: Given multi-modal prompts, Kevin will label actions expanding into 2-3 word utterance combinations with 80% accuracy given 4/5 opportunities across 3 consecutive sessions as measured by SLP data by the end of the IEP period.

Benchmarks/Short Term Instructional Objectives	Anticipated Beginning Date	Method of Evaluation
Given pictures, Kevin will name 10 actions or "ing" cards with 80% accuracy given 4/5 opportunities across 3 consecutive sessions as measured by SLP data.	10/18/2021	Data Collection Progress Monitoring
Given pictures, Kevin will use nouns + actions or "ing" with 60% accuracy given 4/5 opportunities across 3 consecutive sessions as measured by SLP data.	10/18/2021	Data Collection Progress Monitoring
Given pictures, Kevin will use noun + actions + noun with 60% accuracy given 4/5 opportunities across 3 consecutive sessions as measured by SLP data.	10/18/2021	Data Collection Progress Monitoring

Student Name: Kevin Bardwell

DOB: 11/05/2012

Shelby County School District

IEP Meeting Date: 01/07/2022

Program Modifications/Supports for School Personnel:

Data collection and observations

Goal 6 of 7

Area of Need: Language**Personnel/Position Responsible:** SLP

Annual Goal: Given multi-modal prompts, Kevin will follow spatial directions with 80% accuracy given 4/5 opportunities across 3 consecutive sessions as measured by SLP data by the end of the IEP period.

Benchmarks/Short-Term Instructional Objectives	Anticipated Beginning Date	Method of Evaluation
Given verbal or visual prompts, Kevin will follow 1 step directions with 80% accuracy given 4/5 opportunities across 3 consecutive sessions as measured by SLP data.	10/18/2021	Data Collection Progress Monitoring
Given verbal or visual prompts, Kevin will follow 2 step positional directions with 70% accuracy given 4/5 opportunities across 3 consecutive sessions as measured by SLP data.	10/18/2021	Data Collection Progress Monitoring

Program Modifications/Supports for School Personnel:

Data collection and observations

Goal 7 of 7

Area of Need: Language**Personnel/Position Responsible:** SLP

Annual Goal: Given multi-modal prompts, Kevin will use total communication to effectively communicate wants and needs with 80% accuracy given 4/5 opportunities across 3 consecutive sessions as measured by SLP data by the end of the IEP period.

Benchmarks/Short-Term Instructional Objectives	Anticipated Beginning Date	Method of Evaluation
Given verbal, visual, and tactile cues, Kevin will use 5 functional signs with 50% accuracy given 4/5 opportunities across 3 consecutive sessions as measured by SLP data.	10/18/2021	Data Collection Progress Monitoring
Given verbal and visual cues, Kevin will use picture exchange to select activity of choice given 4/5 opportunities across 3 consecutive sessions as measured by SLP data.	10/18/2021	Data Collection Progress Monitoring

Student Name: Kevin Bardwell

DOB: 11/05/2012

Shelby County School District

IEP Meeting Date: 01/07/2022

Program Modifications/Supports for School Personnel:

Data collection and observations

Benchmark/Short-Term Instructional Objectives above may contain the following codes after some or all of the benchmark/objective statements: Introduced (I), Developing (D), State CRT and Writing Assessed (A), and Mastered and Maintained (M). These codes indicate how the objective is being used in the general education curriculum and for TCAP testing at the specified grade level from which the objective is selected.

Supplementary Aids/Services and Support for the child:

NA

KB v. SCBE Due Process
SCS 000282

Student Name: Kevin Bardwell
DOB: 11/05/2012

Shelby County School District
IEP Meeting Date: 01/07/2022

Program Participation

a. Reading

Accommodations

Modifications

- | | |
|--|--|
| <ul style="list-style-type: none"> • Assignments - Give directions in alternative format (written/picture verbal, etc.). • Assignments - Give directions in small, distinct steps. • Environmental Arrangements - Partnered/preferential seating. : In an area that is not distracting to the student(for example, close to windows • Environmental Arrangements - Reduce/minimize distractions (visual, auditory, tactile, movement, and/or social). • Pacing - Allow breaks. • Testing - Oral testing for directions and/or test items, • Testing - Extended Time (___ Minutes of Extended Time) : Time and a half • Assignments - Additional Time : 30 minutes • Assignments - Speech to Text | <ul style="list-style-type: none"> • Content - Modified content |
|--|--|

b. English/Language Arts

Accommodations

Modifications

Student Name: Kevin Bardwell
DOB: 11/05/2012

Shelby County School District
IEP Meeting Date: 01/07/2022

- | | |
|--|--|
| <ul style="list-style-type: none"> • Assignments - Give directions in alternative format (written/picture/verbal, etc.). • Assignments - Give directions in small, distinct steps. • Environmental Arrangements - Planned/preferential seating. : In an area that is not distracting to the student(for example, close to windows • Environmental Arrangements - Reduce/minimize distractions (visual, auditory, tactile, movement, and/or social). • Pacing - Allow breaks. • Testing - Oral testing for directions and/or test items, • Testing - Extended Time (___ Minutes of Extended Time) : Time and a half • Assignments - Additional Time : 30 minutes • Assignments - Speech to Text | <ul style="list-style-type: none"> • Content - Modified content |
|--|--|

c. Spelling

Accommodations

Modifications

- | | |
|--|--|
| <ul style="list-style-type: none"> • Assignments - Give directions in alternative format (written/picture/verbal, etc.). • Assignments - Give directions in small, distinct steps. • Environmental Arrangements - Planned/preferential seating. : In an area that is not distracting to the student(for example, close to windows • Environmental Arrangements - Reduce/minimize distractions (visual, auditory, tactile, movement, and/or social). • Pacing - Allow breaks. • Testing - Oral testing for directions and/or test items, • Testing - Extended Time (___ Minutes of Extended Time) : Time and a half • Assignments - Additional Time : 30 minutes • Assignments - Speech to Text | <ul style="list-style-type: none"> • Content - Modified content |
|--|--|

d. Writing

Student Name: Kevin Bardwell
DOB: 11/05/2012

Shelby County School District
IEP Meeting Date: 01/07/2022

Accommodations

Modifications

- | | |
|---|--|
| <ul style="list-style-type: none"> • Assignments - Give directions in alternative format (written/picture verbal, etc.). • Assignments - Give directions in small, distinct steps. • Environmental Arrangements - Planned/preferential seating. : In a area that is not distracting to the student(for example, close to windows • Environmental Arrangements - Reduce/minimize distractions (visual, auditory, tactile, movement, and/or social). • Pacing - Allow breaks. • Testing - Oral testing for directions and/or test items, • Testing - Extended Time (___ Minutes of Extended Time) : Time and a half • Assignments - Additional Time : 30 minutes • Assignments - Speech to Text | <ul style="list-style-type: none"> • Content - Modified content |
|---|--|

e. Math

Accommodations

Modifications

- | | |
|---|--|
| <ul style="list-style-type: none"> • Assignments - Give directions in alternative format (written/picture verbal, etc.). • Assignments - Give directions in small, distinct steps. • Environmental Arrangements - Planned/preferential seating. : In an area that is not distracting to the student(for example, close to windows • Environmental Arrangements - Reduce/minimize distractions (visual, auditory, tactile, movement, and/or social). • Pacing - Allow breaks. • Testing - Oral testing for directions and/or test items, • Testing - Extended Time (___ Minutes of Extended Time) : Time and a half • Assignments - Additional Time : 30 minutes • Materials - Visual Representations for Math • Assignments - Speech to Text | <ul style="list-style-type: none"> • Content - Modified content |
|---|--|

Student Name: Kevin Bardwell
DOB: 11/05/2012

Shelby County School District
IEP Meeting Date: 01/07/2022

f. Science

Accommodations

Modifications

- | | |
|--|--|
| <ul style="list-style-type: none"> • Assignments - Give directions in alternative format (written/picture/verbal, etc.). • Assignments - Give directions in small, distinct steps. • Environmental Arrangements - Planned/preferential seating: In an area that is not distracting to the student(for example, close to windows • Environmental Arrangements - Reduce/minimize distractions (visual, auditory, tactile, movement, and/or social). • Pacing - Allow breaks. • Testing - Oral testing for directions and/or test items, • Testing - Extended Time (___ Minutes of Extended Time) : Time and a half • Assignments - Additional Time : 30 minutes • Assignments - Speech to Text | <ul style="list-style-type: none"> • Content - Modified content |
|--|--|

g. Social Studies

Accommodations

Modifications

- | | |
|--|--|
| <ul style="list-style-type: none"> • Assignments - Give directions in alternative format (written/picture/verbal, etc.). • Assignments - Give directions in small, distinct steps. • Environmental Arrangements - Planned/preferential seating: In an area that is not distracting to the student(for example, close to windows • Environmental Arrangements - Reduce/minimize distractions (visual, auditory, tactile, movement, and/or social). • Pacing - Allow breaks. • Testing - Oral testing for directions and/or test items, • Testing - Extended Time (___ Minutes of Extended Time) : Time and a half • Assignments - Additional Time : 30 minutes • Assignments - Speech to Text | <ul style="list-style-type: none"> • Content - Modified content |
|--|--|

Student Name: Kevin Bardwell
 DOB: 11/05/2012

Shelby County School District
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State/District Mandated Tests

☐ Student will participate in the following state/district mandated assessment(s):

☐ Achievement

☐ EOC

☒ Tennessee Alternate Assessment

☐ WIDA Access

☐ WIDA Access (Alternate)

☐ ACT

☐ EXPLC RE

☐ PLAN

District Assessment:

☐ No Accommodations

☐ Accommodations

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Student Name: Kevin Bardwell
DOB: 11/05/2012

Shelby County School District
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Special Education and Related Services

Direct Special Education

Type of Service	Provider Title	Sessions Per	Time Per Session	Hours Per Week	Beginning-Ending Dates	Location of Services
Functional Skills	Special Education Teacher	5 Per week	6.75 hr	33 hrs and 45 mins	10/18/2021-08/22/2022	Special Ed Setting

Related Service(s), including Instruction from Specialized Personnel

Type of Service	Provider Title	Sessions Per	Time Per Session	Hours Per Week	Beginning-Ending Dates	Location of Services
Language Therapy	Speech Language Pathologist	8 Per month	30 min	1 hrs and 0 mins	10/18/2021-08/22/2022	Special Ed Setting

Total Special Ed Minutes by Date Range		
Begin Date	End Date	Minutes per Week
10/18/2021	08/22/2022	2085

Note: Service Dates apply during the normal school year, not ESY, unless specified.

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DOB: 11/05/2012

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LE and General Education

Explain the extent, if any, in which the student **will not** participate with non-disabled peers in:

1. the regular class: Kevin will not participate with his non-disabled peers when he is receiving instruction in the Functional Skill classroom 33.75 hours a week and when he is receiving Language Therapy 8 times per month with 30 minute sessions.
2. extracurricular and nonacademic activities: Kevin will participate with non-disabled peers in extracurricular and nonacademic activities to the same extent as his non-disabled peers.
3. and/or, his/her LEA Home School: Services will be provided at his LEA home school

Special Transportation

Transportation Type	Special Instructions	Num Session	Session Length	Begin/End Date
Special Transportation Bus - No special arrangements		5 per week	20 min	01/07/2022 - 08/22/2022

Extended School Year

The IEP Team will determine if Extended School Year (ESY) is required by 04/15/2022.

Basis for Determining ESY Eligibility: The IEP team determined that no data is needed in order to determine if ESY services are necessary.

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Student Name: Kevin Bardwell

DOB: 11/05/2012

Shelby County School District

IEP Meeting Date: 01/07/2022

IEP Participants

EASYFAX



7/- .004BBEAC

The following individuals attended the IEP Team and participated in the development of this Individualized Education Program.

Position	Signature	In Agreement	Date
Kevin Bardwell Parent		<input type="checkbox"/> Yes <input type="checkbox"/> No	
LEA Representative		<input type="checkbox"/> Yes <input type="checkbox"/> No	
Regular Education Teacher		<input type="checkbox"/> Yes <input type="checkbox"/> No	
Special Education Teacher		<input type="checkbox"/> Yes <input type="checkbox"/> No	
Interpreter of Evaluation Results		<input type="checkbox"/> Yes <input type="checkbox"/> No	
Student		<input type="checkbox"/> Yes <input type="checkbox"/> No	
SLP - Shavonica Williams		<input type="checkbox"/> Yes <input type="checkbox"/> No	
SPED Advisor - Nia Coleman		<input type="checkbox"/> Yes <input type="checkbox"/> No	
-		<input type="checkbox"/> Yes <input type="checkbox"/> No	

Student Name: Kevin Bardwell

DOB: 11/05/2012

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1 -		<input type="checkbox"/> Yes <input type="checkbox"/> No	
2 -		<input type="checkbox"/> Yes <input type="checkbox"/> No	

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Student Name: Kevin Bardwell
DOB: 11/05/2012

Shelby County School District
IEP Meeting Date: 01/07/2022

Informed Parental Consent

Please select 'Yes' or 'No' for each statement below:

- ☐ Yes ☐ No I certify that I am the legal parent(s)/guardian(s)/surrogate(s) of this child.
- ☐ Yes ☐ No I have been informed of and understand my rights as a parent, and have received a copy of the notice of procedural safeguards.
- ☐ Yes ☐ No I have been involved in the IEP Team meeting and/or the development of this IEP, and give permission for the proposed program described in this IEP for my child.
- ☐ Yes ☐ No My child and I have been informed of his/her right to represent himself/herself upon his/her eighteenth birthday. (Note: This information must be provided beginning at least one year prior to the student's 18th birthday.)
- ☐ Yes ☐ No I understand that participation in the alternate assessment means my student is participating in a curriculum that may hinder his/her ability to obtain a regular diploma. I understand that my child may instead receive an alternate academic diploma, occupational diploma, and/or special education diploma.

Please select one of the following options:

- ☐ A draft IEP was developed and a copy was provided at least 48 hours prior to my child's IEP team meeting.
- ☐ A draft IEP was developed, but a copy was not provided at least 48 hours prior to my child's IEP team meeting.
- ☐ A draft IEP was developed, but a copy was declined.
- ☐ A draft IEP was not developed prior to the IEP team meeting.

Parent/Guardian/Surrogate Signature

Date

Student Signature

Date

Date IEP was given to parent(s): _____

If the parent(s) did not attend, the person responsible for forwarding and explaining the contents of the IEP to the parents along with their rights is: Cynthia Houston

Documentation of IEP Review by Other Teachers not in Attendance:

Student Name: Kevin Bardwell
DOB: 11/05/2012

Shelby County School District
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Signature _____

Date _____

Signature _____

Date _____

Signature _____

Date _____

Signature _____

Date _____

Signature _____

Date _____

Signature _____

Date _____

KB v. SCBE Due Process
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Student Name: Kevin Bardwell
DOB: 11/05/2012

Shelby County School District
IEP Meeting Date: 01/07/2022

TENNESSEE ALTERNATE ASSESSMENTS

Participation Decision Documentation

To meet the criteria for the Tennessee Alternate Assessment, the student must meet all eligibility criteria descriptors.

Participation Criteria	Participation Criteria Descriptors	Sources of Evidence
1. The student has a significant cognitive disability. Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Review of student records indicate a disability or multiple disabilities that significantly impact intellectual functioning and adaptive behavior. * Adaptive behavior is defined as essential for someone to live independently and to function safely in daily life.	<input checked="" type="checkbox"/> Results of Individual Cognitive Ability Test <input type="checkbox"/> Results of Adaptive Behavior Skills Assessment <input type="checkbox"/> Results of individual and group administered achievement tests <input type="checkbox"/> Results of informal assessment <input type="checkbox"/> Results of individual reading assessments <input type="checkbox"/> Results of district-wide alternate assessments <input type="checkbox"/> Results of language assessments including English language learner (ELL) language assessment if applicable
2. The student is learning content linked to (derived from) the state content standards. Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Goals and instruction listed in the IEP for this student are linked to the enrolled grade-level standards and address knowledge and skills that are appropriate and challenging for this student.	<input type="checkbox"/> Examples of curriculum, instructional objectives and materials including work samples <input checked="" type="checkbox"/> Present levels of academic and functional performance, goals and objectives from the IEP <input type="checkbox"/> Data from scientific research-based interventions <input type="checkbox"/> Progress monitoring data

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<p>3. The student requires extensive direct individualized instruction and substantial supports to achieve measureable gains in the grade-and-age-appropriate curriculum. Yes <input checked="" type="checkbox"/> No <input type="checkbox"/></p>	<p>The student (a) requires extensive, repeated, individualized instruction and support that is not of a temporary or transient nature and (b) uses substantially adapted materials and individualized methods of accessing information in alternative ways to acquire, maintain, generalize, demonstrate and transfer skills across academic content.</p>	<p><input type="checkbox"/> Examples of curriculum, instructional objectives, and materials including work samples from both school and community based instruction</p> <p><input checked="" type="checkbox"/> Teacher collected data and checklists</p> <p><input type="checkbox"/> Present levels of academic and functional performance, goals, and objectives, and post school outcomes from the IEP and the Transition Plan for students age 14 and older</p>
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 SCS 000275

Student Name: Kevin Bardwell

DOB: 11/05/2012

Shelby County School District

IEP Meeting Date: 01/07/2022

The student is eligible to participate in the Tennessee Alternate Assessment if all responses above are marked Yes.

Additional Considerations Not to Use in Reviewing Evidence	
1. A disability category or label	
2. Poor attendance or extended absences	
3. Native language/social/cultural or economic difference	
4. Expected poor performance on the general education assessment	
5. Academic and other services received	
6. Educational environment or instructional setting	
7. Percent of time receiving special education	
8. English Language Learner (ELL) status	
9. Low reading level/achievement level	
10. Anticipated disruptive behavior	
11. Impact of test scores on accountability system	
12. Administrator decision	
13. Anticipated emotional duress	
14. Need for accommodations, e.g., assistive technology/AAC to participate in assessment process.	
<p>Based on consideration of the student's eligibility, the IEP team has determined that the alternate assessment is the most appropriate assessment for this student AND evidence shows that the decision for participating in the Tennessee Alternate Assessment was not based on the above list of Exclusionary factors.</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>	

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Student Name: Kevin Bardwell
 DOB: 11/05/2012

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The IEP team has considered multiple sources of information and data showing that the student 1) demonstrates a significant cognitive disability; 2) is participating in instruction linked to the Tennessee state standards; and 3) requires extensive, direct, individualized instruction and substantial supports.

The IEP team has decided that the student cannot participate in the regular assessment (even with the use of accommodations) and that the alternate assessment is appropriate for the student.

Given the data, the IEP team has decided that the student will/ will not participate in the alternate assessment.

Name	Position	Date

Parent(s)/Guardian	Date

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Student Name: Kevin Bardwell
 DOB: 11/05/2012

Shelby County School District
 IEP Meeting Date: 01/07/2022

IEP Participants

....EASYFAX



7/- .004BBEAC

The following individuals attended the IEP Team and participated in the development of
 this Individualized Education Program.

Position	Signature	In Agreement	Date
Kevin Bardwell Parent	<i>Kevin Bardwell</i>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	1/10/2022
LEA Representative	<i>[Signature]</i>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	1/7/22
Regular Education Teacher	<i>[Signature]</i>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	1/7/22
Special Education Teacher	<i>Emmalone</i>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	1/7/2022
Interpreter of Evaluation Results Laura Bailey	<i>Laura Bailey</i>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	1/10/2022
Student		<input type="checkbox"/> Yes <input type="checkbox"/> No	
SLP - Shavonica Williams	<i>Shavonica Williams</i>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	1/7/22
SPED Advisor - Nia Coleman	<i>Nia Coleman</i>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	1/10/2022
:-		<input type="checkbox"/> Yes <input type="checkbox"/> No	

K.B. v. SCBE Due Process
 000306